

Sunderland City Council

Rubicon Rise

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: Rubicon Rise is a residential care home that provides support for up to six people who are living with learning and physical disabilities. At the time of this inspection six people were using the service.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

People's experience of using this service: People looked very comfortable and at home in their surroundings. Staff were friendly and very skilled at working with people who used the service. Staff were making a difference to people's wellbeing by working well as a team, in harmony with one another and by sharing the same values and principles.

Staff received a wide range of training around managing risk and ensuring people remained safe. Training included, safeguarding, first aid, fire safety and basic food hygiene. Checks were made on the ongoing competency of staff.

People's rights were upheld. The person was given choice and supported to make decisions. Where people did not have capacity to make decisions, they were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

People participated in a range of activities that met their individual choices and preferences. Staff understood the importance of this for people and provided the structured support people required. This enabled people to achieve positive outcomes and promoted a good quality of life.

Staff effectively reported any safeguarding matters. The registered manager thoroughly investigated any concerns, and resolved these matters. All incidents were critically analysed, lessons were learnt and embedded into practice.

The service was well run. Staff told us the registered manager and team leader were fair, and good at listening to people and staff thoughts about how to make the service better. The registered manager carried out lots of checks to make sure that the service was delivering a good service.

Rating at last inspection: Good (Report published on 13 June 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will monitor intelligence we receive about the service 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.

Rubicon Rise

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: One adult social care inspector completed this inspection.

Service and service type: Rubicon Rise 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: This inspection was unannounced and we completed this from 10 to 15 January 2019.

What we did: We reviewed information we had received about the service. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During inspection: We spent time with five people who used the service. 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 spoke with the registered manager, team leader, senior support worker and three support workers.

We reviewed a range of records. This included three people's care records, medication records and various records related to the management of the service.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes

- The registered manager, team leader and senior support workers critically reviewed all aspects of the service and determined if improvements were needed.
- We saw the provider had robust procedures in place to ensure recruitment practices were safe.

Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe. The records used to monitor those risks such as for hydration, nutrition and pressure care were well maintained.
- The building is managed by a housing association but the provider ensured this was safe and well maintained. They also made sure equipment was well-maintained. Emergency plans were in place to ensure people were supported in the events, such as a fire.

Staffing levels

- There were always sufficient staff on duty to meet people's needs. At least three staff worked during the day and one staff member sleep-in overnight. In addition to this, a team leader and the registered manager worked at the service.

Safeguarding systems and processes

- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training in this topic area.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed, for example, where people refused to take them or they were no longer required. Where people were prescribed medicines to take 'as and when required' detailed guidance was available for staff to follow.
- Professionals had reviewed people's medicines to ensure 'Stop over medication of people with a learning disability, autism or both with psychotropic medicines' (STOMP) guidance was followed.

Preventing and controlling infection

- Staff had received infection control training and said they had plenty of personal protective equipment (PPE) available to them.

Learning lessons when things go wrong

- The registered manager and staff critically reviewed all incidents and ensured staff considered how lessons

could be learnt. For example, last year they looked at medication practices and identified that these could be made more robust by locating each person's medication administration records (MARs) in their rooms and completing a daily count. Staff reported this had greatly improved the management of medicines.

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.

Good: 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

- The provider had developed a new assessment tool, which staff had recently introduced at the service. The registered manager and team leader ensured detailed assessments were completed and these informed the care plans.
- Care plans were detailed. They had been kept up to date when people's needs had changed.

Staff skills, knowledge and experience

- Staff had the skills and experience to support people. They received a comprehensive programme of training. Staff's understanding and skills were checked through knowledge and practical tests.
- Staff had regular supervision and appraisals.
- The team leader had a good system to understand which staff needed their training to be refreshed and who required supervision. Staff told us they felt supported.

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

- Staff monitored people's weight to ensure they stayed within a healthy range. They made sure all the people had access to healthy diets and that they had ample portions of food at meals.

Staff providing consistent, effective, timely care within and across organisations

- The staff made sure the service met every individual's needs. One support worker said, "We know people really well and can spot the slightest change in their presentation."
- One person told us that they found the staff knew them well and "They looked after me."

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

- The service was designed to meet the needs of all the people who used it.

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

- People were seen by GPs when concerns arose and attended regular appointments with these healthcare professionals. The staff appropriately referred people to other healthcare professionals such as occupational therapists and dieticians.

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

- We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA), whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The registered manager followed all the principles and guidance related to MCA and Deprivation of Liberty Safeguards (DoLS) authorisations. They were working with the Court of Protection, as a part of a transition process because the model of care was changing to supported living.
- Staff ensured that people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests.

Is the service caring?

Our findings

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

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

Ensuring people are well treated and supported

- We observed staff and found they worked very closely and sensitively with people. The registered manager and staff reported that they adapted their responses and working practices to support each person.
- We observed that staff were friendly and very skilled at working with people who used the service. The people and staff knew each other very well and they looked at ease in each other's company.
- The staff told us how they supported people's human rights and promoted equality and diversity. They actively promoted people's rights and made sure staff treated people in a person-centred manner.

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

- Staff showed genuine concern for people's wellbeing. It was evident from discussions that all staff knew people very well and understood their communication methods. We found that staff worked in a variety of ways to ensure people received care and support that suited their needs. People were encouraged to remain as independent as possible.
- Staff supported people to make decisions about their care. They understood how each person communicated their wants and needs, this was documented in care plans.
- We saw that information about advocacy services was available, and when needed, the staff enabled people to access these services. Advocates help to ensure that people's views and preferences are heard where they are unable to articulate and express their own views.

Respecting and promoting people's privacy, dignity and independence

- The staff explained how they maintained the privacy and dignity of individuals they cared for and told us that this was a fundamental part of their role.
- Staff helped people to feel more confident doing things for themselves. Staff helped people to experience a wider range of activities. Staff routinely supported people to experience everyday events such as visiting local cafés.
- We observed the staff team worked well together and this positively impacted people's quality of life. We found there was a calm relaxed atmosphere within the service.

Is the service responsive?

Our findings

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

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

How people's needs are met

- We observed that people were consistently supported to express their opinions about what was on offer and given choices about all aspects of their care and treatment.
- The registered manager, team leader and staff told us about the activities people engaged in both outside and within the home.
- At the last inspection we found that people expressed their aspirations such as going swimming or on holiday but it was unclear if these goals had been achieved. We found that staff had provided opportunities for people to have these experiences. Where people enjoyed them, these had continued but where this was not the case staff had respected individuals' decisions not to continue. For example, one person had wanted to go swimming but once there found they didn't like getting into the swimming bath so had been able to stop going.
- People had regular contact with relatives and where possible staff supported individuals to go to visit them. When we visited one person went for a trip to see their relative and staff told us they went each week.

Personalised care

- Care plans contained personalised information such as how to support individuals with their personal care and engage in meaningful occupation.
- People's needs were identified, including those related to equality and their choices and preferences were regularly reviewed. Reasonable adjustments were made where appropriate and the service identified, recorded, shared information and communication needs of people, as required by the Accessible Information Standard.

Improving care quality in response to complaints or concerns

- People and their relatives had access to information on how to make a complaint and when needed accessed advocate services.
- Systems were in place to ensure complaints were acknowledged, investigated and responded to by the registered manager. We found that where people had complained, these had been thoroughly investigated and addressed.

End of life care and support

- No one using the service was receiving end of life care.
- Staff were aware of good practice and guidance in end of life care, and respected people's religious beliefs and preferences.

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.

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

Leadership and management

- The culture the registered manager and team leader had created effectively supported the delivery of high-quality, person-centred care. We found that all the staff consistently strived to deliver an excellent service.
- The provider has systems in place to complete regular and comprehensive reviews of the service. The registered manager ensured that actions identified were acted upon and resolved.

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

- Staff told us they felt listened to and that the registered manager was approachable. Staff understood the provider's vision for the service and they told us they worked as a team to deliver high standards. Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements
- The service was well-run. People at all levels understood their roles, responsibilities and their accountability. They were held to account for their performance where required.

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

- The provider and registered manager positively encouraged feedback and acted on it to continuously improve the service. For example, by looking at how to improve medicine management, ensure people achieved their goals and determining the best model of care for the future operation of the service.

Continuous learning and improving care

- The quality assurance system included lots of checks carried out by staff, the senior support worker, team leader and registered manager. The registered manager critically reviewed the findings from the various audits and tools to identify where improvements could be made. Following any change to practice the registered manager then reviewed these to determine if the alterations were having a positive impact for people who used the service.
- A culture of continuous learning meant staff objectives focused on driving improvement and providing a high standard of care.

Working in partnership with others

- People, relatives and visiting professionals had completed a survey of their views and the feedback had been used to continuously improve the service.

