

Middlesbrough Borough Council

22 Levick Court

Inspection report

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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

About the service

22 Levick Court is a residential care home providing personal care to up to 16 people. At the time of the inspection 8 people were living at the home.

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

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. People benefitted from the interactive and stimulating environment. There was a sensory room available for people to access freely.

Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. People had a choice about their living environment and were able to personalise their rooms.

The service was registered with CQC prior to the publication of the Right support, right care, right culture guidance. The service was larger than recommended by current best practice guidance. However, the building had been separated into smaller living areas.

Right Care:

People were supported to make daily living choices. There were positive relationships between people and staff, which meant people were treated with dignity and respect. People's care, treatment and support plans reflected their range of needs, and this promoted their wellbeing and enjoyment of life. Staff understood their safeguarding responsibilities.

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 autistic people. This meant people received compassionate and empowering care which was tailored to their needs. There were enough staff to support people.

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 April 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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 based on the findings of 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.

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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

22 Levick Court

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.

Inspection team

One inspector carried out this inspection. An Expert by Experience made telephone calls to relatives. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

22 Levick Court 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. 22 Levick Court 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

This inspection was announced.

We gave short notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 24 April 2023 and ended on 9 May 2023. We visited the service on 24 April 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 spoke with 3 people who used the service and 5 relatives about their experience of the care provided. We spoke with 4 members of staff including, the registered manager, 2 care assistants and 1 senior care worker. We gained feedback from external professionals.

We reviewed a range of records. This included 3 people's care records and medication records. We looked at 3 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures, were reviewed.

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. 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

- People were kept safe from avoidable harm. Staff knew people well and understood how to protect them from abuse. Staff worked well with other agencies to report any concerns.
- The registered manager understood their responsibility to share information with the local authority safeguarding team and CQC to ensure allegations or suspected abuse were investigated.
- People were advised by staff on how to keep safe. If there were areas of individual concern they were recorded in people's care plans.
- Relatives said they felt the service was safe and spoke positively about it. One relative said, "[Person] is absolutely safe, I have no concerns whatsoever."

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

- Risks were appropriately assessed and managed. People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- Care plans provided a person-centred approach to supporting people. Risk assessments detailed how to effectively manage risk. This included risks to people's personal safety and physical health that had the potential to put a person or others at risk. Risk assessments were reviewed regularly to ensure staff had access to accurate information to keep people safe.
- A range of risk assessments were in place to ensure the safety of the environment. People's care records contained details of personal evacuation plans. These guided staff on the assistance needed to evacuate people safely in the event of an emergency such as fire.
- Accident and incidents were managed safely. The registered manager had oversight of accidents and incidents through a tracker and used this information to drive service improvements. Analysis of incidents was used to assess whether preventive measures could be introduced, and lessons learnt to keep people safe.

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- There were enough staff to meet people's needs. The numbers and skills of staff matched the needs of people using the service.
- Staff were recruited safely. A range of pre-employment checks were carried out to ensure only suitable staff were employed. These included DBS checks (Disclosure and Barring services), obtaining references and checking employment histories.
- Relatives spoke positively about the team supporting people. One relative said, "There are plenty of staff, they know how to support [person], they know [person] so well." Another relative said, "The staff and [registered manager] are wonderful, I would give them a 12 out of 10. They are all very good."

Using medicines safely

- Medicines were managed safely. The service ensured people's actions were not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.
- Staff followed systems and processes to administer, record and store medicines safely. Medicine audits were carried out to ensure medicines were managed safely.
- Staff had received training and their competence in administering medicines was assessed periodically.

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.

Visiting in care homes

- Visiting was in line with government guidance and health professionals' advice. Visitors were not restricted in any way and safety was promoted while on site.

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. 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 registered manager was visible in the service. They were approachable and took a genuine interest in what people, staff, family, carers and other professionals had to say. Equality and diversity were promoted. One relative told us, "I am always asked for my feedback, I have regular 1 to 1 call with [registered manager]. [Registered manager] always listens to me."
- Staff told us how supported and happy they were. One staff member said, "It's a lovely place to work, it's a small service, but I love it that way, we are like a family."
- Relatives told us they would recommend the service to others. One relative said, "Yes, I 100% would recommend this service to others." Another relative said, "I definitely would recommend this service."

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 worked to ensure transparency and honesty throughout the service. They contacted other agencies when appropriate. The registered manager understood the importance of being open and honest when things went wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Governance processes were effective. These processes helped to keep people safe, protect people's rights and provide good quality care. For example, the management team undertook a range of regular audits across the service.
- The registered manager was clear about their role. They understood the need to lead by example and offer the team support. Staff spoke highly of the registered manager. One staff member said, "I feel so supported by [registered manager], they have been amazing since I started." Another staff member said, "[registered manager] is lovely, they've been a great manager."
- Staff understood their responsibilities and what was expected of them. Training deemed mandatory by the provider had been delivered. However, staff had not received regular supervision in line with the provider's policy. The registered manager was open and honest with us about this and had measures in place to address this.

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

- People were actively encouraged to express choices. The specific communication needs of people were fully taken into account by staff. For example, 1 person liked their bedroom laid out in a particular way and asked staff not to move items from the floor. Staff respected this.
- Relatives told us they were kept well informed. One relative said, "They keep in touch with us, they let us know if anything has happened or if anything is coming up like an appointment."
- Effective communication systems were in place. Daily handovers were completed at the end of each shift. This kept staff well informed about things that had happened.
- The registered manager sent out monthly updates to all staff as an alternative in situations where face to face meetings could not take place. The registered manager had a positive relationship with the staff team. They explained they had an open-door policy and staff could come and speak to them at any time should they need to. Staff confirmed this. One staff member said, "[Registered manager] is approachable, I have gone to [registered manager] if I have needed to talk about something, I know I always can."

Working in partnership with others

- Effective systems were in place to work in partnership with other professionals to meet people's needs. Records showed staff actively engaged with other professionals to ensure people received the support they required in a timely way. This help achieve positive outcomes for people.