

Salutem LD BidCo IV Limited

Edward Street

Inspection report

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Date of inspection visit:
10 May 2019

Date of publication:
05 June 2019

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:

The service accommodates six people in two adapted domestic style neighbouring bungalows within the local community. Three people live in each of the bungalows.

The size of service meets current best practice guidance. This promotes people living in a small domestic style property to enable them to have the opportunity of living a full life.

People's experience of using this service:

The principles and values of Registering the Right Support and other best practice guidance ensure people with a learning disability and or autism who use a service can live as full a life as possible and achieve the best outcomes that include control, choice and independence. At this inspection the provider ensured they were applied.

The outcomes for people using the service reflected the principles and values of Registering the Right Support in the following ways; promotion of choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People were protected from the risk of abuse and harm. Staff had completed training in topics of safeguarding and health and safety and they understood their responsibilities for keeping people safe. People were supported to take positive risks as part as an independent lifestyle. Medicines were safely managed and administered to people at the right time. There was a system in place for reporting and learning from accidents and incidents.

People's needs and choices were assessed and planned for with their full involvement. Care plans were detailed and identified intended outcomes for people and how they were to be met. Staff provided people with effective care and support. The premises were suitably adapted, designed and decorated to meet peoples' needs and choices and was in keeping with other properties in the neighbourhood. People's right to make decisions was understood and promoted.

People commented positively about how kind, caring and respectful staff were. People's independence, privacy and dignity was promoted. Staff knew people well and had formed positive and trusting relationships with them. People's views about their care and support was regularly obtained and they were listened to.

Care plans reflected people's needs and choices in a personalised way and people received care and

support which was responsive to their needs. People were provided with information in formats which they could easily access and understand. The use of assistive technology enhanced people's communication, independence and overall quality of life. People knew how to complain and were confident about speaking up.

Managers promoted a person-centred and inclusive culture and provided high-quality care and support to people. Managers of the service were supportive and approachable. There was good partnership working with other professionals. Effective systems were in place to check on the quality and safety of the service and improvements were made when required.

Rating at last inspection: This was the first inspection of the service since it was registered with CQC in May 2018.

Why we inspected:

This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Follow up:

We will continue to 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?

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 

Edward Street

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection team consisted of one adult social care inspector.

Service and service type:

Edward Street is a care home. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. 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:

We gave the service 48 hours' notice of the inspection site visit 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.

What we did:

Our plan took into account information the provider sent us since the last inspection. We also considered information about incidents the provider must notify us about, such as abuse; and we looked at issues raised in complaints and how the service responded to them. 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 the inspection:

We spoke with all six people using the service to ask about their experience of care. We also spoke with the

registered manager, team leader, regional manager and six staff.

We looked at two people's care records and a selection of medication and medication administration (MARs). We looked at other records including quality monitoring records, recruitment and training records and other records relating to the management of the service.

After the inspection

We continued to seek clarification from the provider to corroborate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

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

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from abuse and staff had completed training in safeguarding adults.
- Staff knew the different types and indicators of abuse and what they would do if they suspected or witnessed abuse. Managers and staff knew to raise any actual abuse or allegations of abuse with the local authority safeguarding team.
- People understood what abuse meant and were confident in raising any concerns about their safety or how they were treated.

Assessing risk, safety monitoring and management

- Risks people faced were identified and control measures put in place to mitigate them. People were involved in the development of their risk management plans and they were encouraged and supported to take positive risks as part of an independent lifestyle.
- Staff had completed training in topics of health and safety and they had access to a 24 hour on-call system for emergency advice.
- The service had contingency plans in place to manage unforeseen emergencies.
- Each person had a personal emergency evacuation plan (PEEP). They were kept under review and easily accessible in the event of an emergency.
- Regular safety checks were undertaken on the environment, equipment and utilities.

Staffing and recruitment

- The recruitment of staff was safe. A range of pre-employment checks were carried out and verified to check the suitability of applicants before they were offered a job. People were actively involved in the recruitment of staff.
- People were supported by the right amount of suitably skilled and experienced staff.

Preventing and controlling infection

- Staff completed up to date training in preventing and controlling the spread of infection and had access to relevant guidance and information to support their practice.
- Staff used personal protective equipment (PPE) and disposed of waste safely to minimise the spread of infection.
- The environment was kept clean and hygienic.

Learning lessons when things go wrong

- There was a system in place for recording, monitoring and learning from incidents.

- No incidents or accidents had occurred at the service. However, the registered manager explained that they would undertake a root cause analysis of any near miss, incident or accident to identify any patterns or trends and that learning would be shared across the team.

Using medicines safely

- Medicines were managed safely.
- Staff were trained and deemed competent before they administered medicines, and regular checks ensured people received their medicines safely.
- People told us they received their medicines at the right time and in a way, they preferred.
- Protocols were in place for the administration of medication prescribed for people to be given 'when required' (PRN).

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

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, and choices were assessed and planned for. Expected outcomes were identified based on people's individual needs and choice. People told us they had been fully involved and listened to throughout the assessment and care planning processes.
- The service worked closely with other health and social care professionals to complete assessments. Their professional guidance was used to help plan effective care and support for people.
- People were supported and encouraged to set and achieve their goals. We saw many examples where staff had consistently supported people in achieving their goals.

Staff support: induction, training, skills and experience

- Staff received appropriate training and support.
- New staff completed induction training and all staff were provided with ongoing training in topics specific to their role and people's needs.
- Staff knowledge and competence was regularly checked to assess the effectiveness of their learning.
- Staff were given opportunities to discuss their work, learning and development needs. They told us they felt well supported by managers and colleagues.

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

- People received the support they needed to eat and drink and to maintain a healthy balanced diet.
- People's food preferences were recorded in their care plan along with any special dietary requirements.
- Staff understood the risks people faced with eating and drinking and they followed guidance provided by speech and language therapists (SALT) and dieticians.
- People were involved in food shopping and the planning and preparation of their meals. Mealtimes were flexible and relaxed.

Staff providing consistent, effective, timely care; supporting people to live healthier lives and access to healthcare services and support.

- Each person had a hospital passport that included important information about them that other professionals needed to know in an emergency.
- People accessed a range of health and social care services to maintain their health and wellbeing.
- Staff encouraged and supported people to lead active lifestyles. People told us they regularly took part in activities in the community.

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

- The environment was suitable adapted, designed and decorated to meet people's needs and choice.
- The premises and gardens were of a domestic style with adaptations which enabled people to move around their home freely and independently.
- People chose the décor, floorings and furniture in their bedrooms and shared spaces.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- No person using the service had a DoLs in place. However staff had completed training in the MCA and understood the principles of the act and when they should be applied.
- Staff obtained people's consent before providing and care and support and people told us this was usual.
- Care plans included guidance for staff on how to support people to make decisions.

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

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 treated people as equals and respected and supported their individual lifestyle choices.
- Staff displayed positive, warm and familiar relationships with people.
- People told us staff always treated them with dignity and respect. Their comments included; "Very respectful" "Kind" "They [staff] treat me very well."
- Staff went above and beyond their duties so that people could experience ordinary lives and achieve their goals. We heard examples where staff had supported people in their own time to go on holiday.
- People shared information about their life history, important relationships, likes, dislikes and preferences and staff used this information to get to know people. Staff clearly knew people well and engaged them in meaningful conversations and activities.

Respecting and promoting people's privacy, dignity, independence

- Staff promoted and respected people's privacy, dignity and independence and their freedom and choice. People were empowered to have control over their lives.
- Staff understood how people communicated their needs and choices and communicated with people using the person's preferred method of communication.
- Staff supported and encouraged people to maintain and develop relationships with those that mattered to them. People had developed close relationships with others they lived with and through social networks in the community. Staff welcomed people's family members, friends and partners.
- Staff respected people's personal space and only entered their bedrooms after knocking and being invited in.
- Records relating to people's care were kept confidential. Discussions of a personal nature were held with and about people in private.

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

- Staff understood it was a person's human rights to be treated with dignity and respect and to be able to express their views.
- People were actively involved in their care. Staff worked in partnership with people and empowered them to have a voice and share their views through daily discussions, care reviews, regular house meetings and surveys.
- Staff knew the importance of ensuring people had access advocacy services and other support networks so that they were supported to make choices and decisions which were right for them.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were fully involved in the completion of their assessments and the development and reviewing of their care plans.
- Assessments were person-centred and used to develop detailed individualised care plans.
- People received care and support that was tailored to meet their individual needs, and offered flexibility, choice and continuity of care.
- People told us they received personalised care and support from staff who knew them well. Their comments included; "I choose everything," and "Everything is just how I like it."
- We saw examples where staff had supported people to set and achieve their goals and aspirations.
- Staff understood people's needs and preferences and provided care and support which was accessible and promoted equality, including those related to protected equality characteristics.
 - People's independence was enhanced through the use of assistive technology. We saw examples where people used technology to communicate, control lighting, TVs and doors and to keep in touch with friends and family.
- People told us social activities were an important part of their life and staff supported them with this. People maintained links with the local community and pursued their hobbies, interests and religious beliefs.

Meeting people's communication needs

From August 2016 onwards, all organisations that provide adult social care are legally required to follow the Accessible Information Standard (AIS). The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Information was provided to people in formats to meet their needs. Care plans included how people communicated and if they used any communication aids or systems.
- Where it was required staff used pictorial aids and signs to communicate with people.

Improving care quality in response to complaints or concerns

- People knew how to complain and were confident about complaining should they need to. People felt their complaints would be listened to and acted upon. Their comments included; "I'm not worried about complaining at all" and "I'd speak up"
- No complaints had been received about the service. However, the providers procedure for dealing with complaints aimed to ensure complaints were dealt with in an open and transparent way and used as an

opportunity to improve the service.

End of life care and support

- People were given the opportunity to plan their end of life care and their wishes after death. Family members and friends were involved as appropriate.
- Staff had completed training in end of life care and were passionate about ensuring people experienced a comfortable and pain free death. They knew the importance of involving other professionals when a person reached the end stages of their live.

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

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

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The registered manager planned and promoted person-centred, high-quality care for people. Feedback from people and staff supported this. Comments we received about the registered manager included; "Cares a lot about people," "Puts us first" and "Communicates well."
- The culture of the service was caring and inclusive. People were empowered and involved in planning their care and support and in the running and development of the service.
- Managers and staff treated people as equals and valued people as individuals. People told us they felt involved, valued, respected and listened to.

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

- There was a clear management structure across the service which everyone was familiar with. The registered manager had overall responsibility for the day to day running of the service and was supported by a regional manager. Team leaders were responsible for line managing areas of the service.
- Managers motivated staff and acknowledged their achievements. Staff told us they were proud to work for the service and felt valued and respected by managers.
- People and staff commented that managers were visible, approachable and supportive.
- People were fully involved in how their care and support was planned and delivered and they received care and support which was safe, effective and responsive to their needs.
- No notifications had been received by the Care Quality Commission (CQC), however the registered manager understood when this was required.

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

- There was a positive culture of engaging people, staff and others. The culture was open and transparent and supported equality and inclusion.
- People were empowered to voice their views, opinions and experiences about the service and their voices were heard.
- Managers operated an 'open door' policy whereby people and staff could speak with them in confidence.
- Communication with health and social care professionals was consistent. One health professional commented "Staff follow our guidance and are good at communicating with us."

- People and others were given opportunities to comment on the service and put forward any ideas for improvement.

Continuous learning and improving care

- Quality assurance systems were in place and used effectively to monitor the quality and safety of the service and make improvements.
- Regular checks and reviews were in place to assess staff performance and their learning and development needs.
- Meetings with staff were used as an opportunity to share learning and ways of improving the service.

Working in partnership with others

- The service worked in partnership with other professionals such as commissioners of the service, local authority safeguarding teams and the Clinical Commissioning Group (CCG).