

Active Care Services Ltd

Micron House

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

Micron House is a residential care home. The care home accommodates 10 people in one adapted building. At the time of the inspection 10 people were living there.

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

People told us they felt safe and staff knew how to protect people from the risk of harm or abuse. People's risks were assessed, monitored and managed.

People were supported by enough staff that had been safely recruited. Medicines were given as prescribed. Staff had access to personal protective equipment.

Accidents and incidents were monitored and reviewed. The registered manager informed us of incidents as required by law.

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 were supported to access healthcare agencies when required.

People told us staff were kind in their approach. People told us their dignity and privacy were maintained and they were involved in the planning and review of their care.

People received care that was responsive to their needs. Care records were reflective of people's support needs and were up to date. The provider had a complaints process in place which people were aware of and knew how to access.

The provider had quality, auditing and monitoring systems in place which included competency checks on staff practice. People and staff said the provider and management team were approachable and the culture of the organisation open and friendly.

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 January 25 2016).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we 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 safe.

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 lead findings below.

Good ●

Micron 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 visit was completed by one inspector.

Service and service type

Micron House 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 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.

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 and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with four people, two staff and four relatives. We looked at three people's care records and records associated with the monitoring of the service provided.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with three care staff to gain their views about working at the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question remains the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People spoken with told us they felt safe living at the home.
- There were systems in place to ensure people were safe and protected from abuse. These included safeguarding policies and procedures and staff training. Staff spoken with were clear about the action they would take if abuse was suspected.

Assessing risk, safety monitoring and management

- People and their relatives were positive about the way their safety needs were identified and managed. This included risks to their skin health, mobility and people's care needs.
- Staff had a detailed understanding of the risks to people's safety and understood how to maintain their safety and independence.
- Staff were able to seek guidance without delay, if they had any concerns for people's well-being or safety.

Staffing and recruitment

- The recruitment and selection process ensured that staff were only employed once all the necessary checks had been completed. The registered manager ensured that references, application form, interview and a disclosure and barring check DBS was completed before staff were employed. The staff member then worked alongside the registered manager and completed training in various topics that supported them to keep people. People felt there was enough staff to support them.

Using medicines safely

- Where people required some support, medicines systems were organised, and people were receiving their medicines when they should. One relative told us, "We can rely on (staff) to give [person's name] their tablets."
- The provider was following safe protocols for the receipt, storage, administration and disposal of medicines. Medication administration records were completed to ensure people had their medication as prescribed. Staff had completed the appropriate training to support people safely.

Preventing and controlling infection

- Staff were supported to follow good hygiene practices to prevent infections and had the equipment they required to do this.
- A recent environmental health food hygiene visit had taken place and the service was rated as five stars.

There were procedures in place for staff to follow to minimise the spread of infection as much as possible.

Learning lessons when things go wrong

- Systems were in place to take any learning from incidents and accidents. The registered manager told us, "I am always willing to changes things if it means the people living here get a better life and feel safe."

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people's outcomes were good and people's feedback confirmed this.

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

- The registered manager carried out a pre-assessment, so they could be sure they could support people how they wanted. Relatives confirmed their involvement so they would feel reassured that their relative was going to be looked after. One relative told us, "Before I came here I had been to many other homes which I did not like, although they were posh. This one felt right, no soon as I walked through the door. I am pleased to say they have done a brilliant job and mom is thriving."

Staff support: induction, training, skills and experience

- We saw that staff had completed training to meet the needs of the people they supported. We saw records to show staff had regular supervision, so the registered manager could monitor staff performance. Personal development was encouraged, for example staff who would like to progress into management were supported.
- Where new staff were appointed, we saw an induction programme which consisted of staff working alongside more experienced staff. The care certificate standards were also included in the induction process. The care certificate is an identified minimum set of standards that health and social care workers adhere to. This ensured staff had the appropriate skills and knowledge to support people safely.

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

- People were supported to maintain a healthy diet and were supported appropriately when required by staff.
- Staff spoken with were aware of how to support people who may be at risk of not eating and drinking enough to remain healthy. Referrals were made if concerns were identified to other healthcare professionals for support.
- People could choose what they liked for lunch. On the day of the inspection people were asked if they would like fish and chips from the local fish and chip shop. One person told us, "We have this a couple of times a month, it's great, I have fish, chips and a sausage. We can have what we what really."
- People's dietary intake was monitored. Care plans and risk assessments provided the information to enable staff to offer people the right amount of help when needed.

Staff working with other agencies to provide consistent, effective, timely care.

- Our observations showed staff supported people as and when required. We saw that there was staff around in the communal areas at all times, talking to people, assisting people with different things. We saw

people were relaxed in the presence of staff and there was good banter with laughter.

- Staff spoken with had a good understanding of people's day to day health needs and could explain how they would support people in case of an emergency.

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

- People's records showed that when required they were supported to access GPs and district nurses. Records demonstrated where instructions had been given by the other professionals, the registered manager and staff carried out the instructions to ensure people's healthcare needs were met.

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

- People's bedrooms were clean and personal to them. There was suitable equipment to support people with their care needs. Risk assessments had been completed to ensure staff were aware of the risk involved when using equipment to support people.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). The registered manager had taken the necessary steps to ensure where people were not able to give consent then a DoLS application had been made.

We checked whether the service was working within the principles of the MCA. Some people living there lacked capacity.

- Staff we spoke with gave examples how they supported people to make their own decisions as much as possible. We observed staff explaining to people what they wanted them to do and observed how staff gained consent when supporting their care needs. We saw that staff gave people the opportunity 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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's care records showed that the care provided was centred on the individual and considered all aspects of their care, including people's different cultural needs. People were fully involved in how they wanted their care to be provided. Care plans reflected the choices they made.
- People told us they were treated with respect and their views were listened to.
- People and their families described the care staff as caring and kind. One relative told us, "I have never heard mom sing, she now sings all the time, and has a smile on her face. It was so hard letting her go into a care home. It gives me peace of mind that I did the right thing, she is happy." Another relative told us, "When I was young we used to go to the park in the winter and mom would get all the dead leaves together and we would jump up and down on them and crunch them it was a game I loved. I told the staff about this. It was a fond memory.

When I next came, the staff had gathered all the leaves, put a cover on the floor so mom could do this again that's how caring the staff are."

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

- People and their families told us they felt involved in decisions. People were offered choices that promoted their independence.
- People were supported to make decisions about their care. We observed staff speaking with people giving them choices and guidance.

Respecting and promoting people's privacy, dignity and independence

- People had their dignity and privacy respected. All the people we spoken with told us that staff treated them with respect. People were supported to be independent as much as possible by encouraging people to do as much as they could for themselves..

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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 and their relatives made positive comments to us about the service. Comments included the registered manager being 'excellent' and 'always available'. Relatives described 'nothing being too much trouble for staff' and 'everything being perfect' at the home.
- People had care plans which highlighted individual needs and preferences and included detailed person-centred information.
- Relatives told us staff knew people well and provided individualised support. One relative told us, "I visit every day and whichever staff are on, I see that the care and attention to detail is consistent."
- People were supported by staff who had a good understanding of their care and support needs and their personal preferences. This enabled them to provide personalised care tailored to the needs and wishes of the person.
- People's care plans contained detailed information for staff on how best to support them with personal care, eating and drinking, medicines and other day to day activities.

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 registered manager told us, information would be provided in different format if required.
- Communication care plans described support people needed to enable staff to understand their wishes

Improving care quality in response to complaints or concerns

- A complaints procedure was in place and we saw that where complaints had been made the procedure had been followed.
- People and relatives all told us they were comfortable talking to any of the staff about any concerns or complaints they may have. One person said, "I would tell them (staff) if I had any worries, they would deal with it." One relative told us, "If you mention something to staff or the manager, then action is taken, no matter how little it is. I cannot fault the staff, the service or the care given."
- The registered manager told us, if they had a complaint then it would be thoroughly investigated. Records confirmed this action was taken. This open approach was reflected in people's willingness to complain if

they felt it necessary.

- The registered manager regularly checked that people were happy with the service they received so any concerns could be dealt with before they developed into a complaint. Any feedback received was used as an opportunity to improve the service.

End of life care and support

- People and their relatives were supported to make decisions and plans about their preferences for end of life care. Advanced planning took account of people's wishes to remain at the service at the end of their life, in familiar surroundings and supported by staff who knew them well.
- A staff member told us, "When people are at the end of their life, we do a memory box. We support them how they want, which would have been discussed with them. We adhere to their wishes. We give the memory boxes to their family when they pass away."

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

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

- The service was well led by an experienced registered manager and a supporting team. The registered manager described how they were developing staff to ensure succession planning within the service. Staff were clear about their responsibilities and the leadership structure.
- The registered manager was clear about her responsibilities for reporting to the CQC and the regulatory requirements.
- Risks were clearly identified and escalated where necessary.
- Staff were extremely positive about the skills and leadership of the registered manager.

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

- The emphasis of the service was to ensure people received person-centred care that met their individual needs.
- The registered manager worked closely with families so people had support from their relatives and people's relatives had peace of mind that their relative was being cared for.
- Staff told us they had good support from the management team, good training and opportunities to progress.

Continuous learning and improving care.

- The registered manager has clear procedures in place that were followed in practice to monitor, review and ensure personalised care was provided.
- The registered manager regularly checked that people were happy with the service they received so any concerns could be dealt with before they developed into a complaint. Any feedback received was used as an opportunity to improve the service.

Working in partnership with others.

- The registered manager works closely with other professionals to ensure consistency of the delivery of the service. Systems were in place and used effectively to continuously, identify, analyse monitor and review risks so people were provided with good 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

- The registered manager told us if mistakes are made they took full responsibility to ensure that the same mistake were not repeated. The information was used as a learning opportunity and to improve the service.