

# Crowne Home Care Limited

# Littleton 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: Littleton House is a supported living service that was providing personal care to 20 people at the time of our inspection, some of whom may have a learning disability, autism, mental health or physical disability. The service supported younger and older adults.

This service provides care and support to people living in six separate supported living settings, so that people can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support. The office is onsite of the supported living homes, so we were able, with people's permission, meet and speak with them during our visit.

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.

Rating at last inspection: At the last inspection the service was rated Requires Improvement. The report was published 01 February 2017.

Why we inspected: This was a scheduled inspection based on the previous rating.

People's experience of using this service:

- People continued to tell us they felt safe and well supported.
- Staff had a good understanding in how they protected people from harm, and recognised different types of abuse and how to report it.
- Potential risks to people had been identified and people had involved with decisions in how to reduce the risk of harm.
- There were enough staff on duty to keep people safe and meet their needs.
- People's medicines were managed and stored in a safe way. Safe practice was carried out to reduce the risk of infection.
  
- People's care continued to be assessed and reviewed with the person involved throughout.
- People were supported to have a healthy balanced diet and were given food they enjoyed.
- People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service support this practice.
- Staff worked with external healthcare professionals and followed their guidance and advice about how to support people following best practice.

- Staff treated people as individuals and respected the choices they made.
  - People's care was delivered in a timely way, with any changes in care being communicated clearly to the staff team.
  - People were supported and encouraged to maintain their hobbies and interests.
  - People had access to information about how to raise a complaint, where complaints had been received the provider had managed these inline with their policy.
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- The registered manager was visible within the service, they spent their time listening to them.
  - The checks the registered manager made to ensure the service was meeting people's needs focused upon people's views and experiences.

Follow up: We will continue to monitor the service to ensure that people receive safe, compassionate, high quality care. Further inspections will be planned for future dates.

## 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 ●

# Littleton 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. 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: One inspector.

Service and service type: This is a supported living service. It provides personal care to people living in their own homes. It provides a service to younger and older adults and people who may have a learning disability, autism, mental health or physical disability.

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 was an unannounced inspection. We visited the office location on 06 February 2019 to see the registered manager and office staff; and to review care records and policies and procedures. However the registered manager was not available during our office visit, so we spoke to them on the telephone on 11 February 2019. On the 07 and 08 February 2019 we made telephone calls to relatives.

What we did;

Before inspection:

- Our inspection was informed by evidence we already held about the service. We also checked for feedback we received from members of the public and local authorities. We also checked records held by Companies House.

During inspection:

- We spoke with five people who used the service and four relatives.
- We spoke with the business development manager, senior care co-ordinator and five support workers. We looked at three people's care records and other records that related to people's care such as medication records, audits and other records about the management of the service.

After inspection: We spoke with the registered manager.

# 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, this key question was rated "Requires Improvement". As we found that the provider had not followed safeguarding procedure and reported incidents to the Local Authority.

At this inspection, we found the provider had taken steps to improve. Therefore, the rating for this key question has increased to "Good".

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

Systems and processes to safeguard people from the risk of abuse

- People told us they continued to be kept safe by the staff who supported them.
- Staff demonstrated a good understanding of different types of abuse and what approach they would take in the event of any concerns.
- The registered manager took action and reported safeguarding's when these were identified.

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

- Staff supported people in a way which kept them safe but maintained their independence. For example, one person told us how they were supported by one staff to keep them safe when mobilising outside. They said staff were aware of the reasons why.
- Staff were aware of people's individual risks and how best to support them.
- People were receiving their medicines when they should. The provider was following safe protocols for the receipt, storage, administration and disposal of medicines.
- Staff communicated information about incidents and accidents. The registered manager and provider monitored these events to help prevent further occurrences.

Staffing and recruitment

- People told us there were enough staff on duty to meet their needs in a timely way.
- Staff told us there were sufficient numbers of staff on duty and one to one support for people was always covered.
- The registered manager understood people's individual support needs and what skill mix of their staff was required to keep people safe.
- The provider undertook checks on the suitability of potential staff before they begun work

Preventing and controlling infection

- People told us staff kept their homes clean and where able the provider supported them with the maintenance of their homes.
- Staff followed their infection control training they had received to reduce the likelihood of the spread of

infections and people experiencing poor health. This included using equipment such as gloves and aprons.

# 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 "Good". At this inspection we found the rating remained "Good".

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

- People told us they were involved in the assessment of their care from the beginning.
- People would spend time in the service first before they made the decision to move in.
- The provider told us that this approach also meant they got to know the person better, whether they would be able to meet their needs, and whether other people living in the service wanted the person to live with them

Staff support: induction, training, skills and experience

- People told us staff were confident in their approach and had the knowledge and abilities to meet their needs. One person told us, "The staff are all very good at looking after me."
- Relatives told us they were happy with the way their family members were cared for and were confident in the staff's abilities to care for their family member.
- The provider had a comprehensive induction for new staff, and training ran throughout the year, to keep staff up-to-date with best practice. There was a good skill mix of staff on duty at the time of our inspection.
- Regular spot checks and competency assessments were carried out to ensure staff were applying their skills and knowledge in the right way
- Staff were confident in the care and support they provided. They told us they had received training that was appropriate for the people they cared for, such as eating and drinking.

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

- Support offered to people varied dependant on people's individual needs. People's independence in meal planning, shopping and meal preparation was promoted.
- People told us they were given a choice of food to eat during the day and had access to fresh fruit and snacks if they wanted.
- Staff monitored people's weight to ensure this remained stable. Where people were on a specialised diet, staff were aware of how to meet their dietary needs.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff encourage and/or supported people to attend health appointments, opticians and dental appointments, so they would remain well. People told us staff promptly helped them to see their GPs if they

were unwell.

- Staff understood people's health needs and gave us examples of advice they had followed from the person's doctor or district nurses, so people would enjoy the best health outcomes possible.

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 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.

- People told us staff would ask for their consent before undertaking any personal care. People felt staff respected their wishes and listened to them.
- Staff understood and applied the Mental Capacity Act principles in the way they supported people.
- The registered manager worked with healthcare professionals to understand whether people had capacity to make decisions about their care and treatment.

# 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 "Good". At this inspection we found the rating remained "Good".

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

Ensuring people are well treated and supported; equality and diversity

- People were very complimentary about the service they received. One person said, "I love it here. I love the staff, I get on very well with all of them."
- People told us they felt part of a family, and staff told us they tried to create a homely atmosphere.

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

- Staff recognised what was important to people and ensured they supported them to express their views and maintain their independence. One person told us, "I feel really supported." They explained how the whole staff group supported and encouraged them in the decisions they made about their support and their future aspirations.
- A relative told us staff supported their family member well and had, "Brought them out of their shell." Another relative told us how staff promoted their family members choice, and were "surprised" by their diverse interests that the person was part of and felt the staff encouraged this.

Respecting and promoting people's privacy, dignity and independence

- People told us they were treated in a dignified and respectful way and we saw staff were respectful towards them at all times.
- A relative told us their family member were treated well by staff and their privacy was maintained.
- Staff told us they respected the person's privacy by ensuring information about their care and support was only done so with their consent.
- People's confidential information was securely stored, to promote their privacy.

# 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 "Good". At this inspection we found the rating remained "Good".

Good: 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 continued to be involved in the planning their care from the beginning and their needs continued to be met. People told us staff respected their wishes, such as when they would like to get up in the morning. Staff spoken with were able to describe people's preferences and how they liked to be supported.
- People felt listened to and involved in their care, one person shared with us how they enjoyed going horse riding and that staff supported them to do this.
- Staff told us a good level of information was available on the providers electronic system, which could be updated with any changes and then staff advised. Staff also said they felt it was important to listen to people as this was the best way to learn.
- People's care needs were continually reviewed and assessed to ensure the care provided was inline with the person's support needs and wishes.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure for people, relatives and staff to follow should they need to raise a complaint. This was also available in different formats, such as pictorial, to meet people's communication needs.
- People and the relative told us they knew how to raise a complaint if they needed to but were very happy with the service provided.
- Where the provider had received complaints these had been investigated and responded to inline with the providers complaints policy.

## 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, this key question was rated "Requires Improvement". As we found that the provider did not have systems for responding to incidents and some aspects of record keeping.

At this inspection, we found the provider had taken steps to improve. Therefore, the rating for this key question has increased to "Good".

Good: 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; and how the provider understands and acts on duty of candour responsibility; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics.

- People knew the management team well, and felt they listened and were responsive to their requests. People felt involved in the running of the service, for example, where a new person was looking to move into a bungalow, existing residents had the opportunity to meet them and were asked for their views first.
- Relatives felt the service was well run, by a management team who cared. One relative told us the provider was "Exceptional", and were, "Really passionate about the service." Relatives had confidence in the service provided, with a further relative saying, "I trust them, that they look after [the person] well."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; Working in partnership with others.

- Staff said they worked well as a team and felt supported by management in their role. Staff told us that the provider was visible within the service, and was always available during out of office hours to answer any queries or concerns.
- Management staff were clear about their roles, they monitored performance of staff supervisions, spot checks of staff practice and sharing information in team meetings to ensure all staff were consistent in their approach to the care and support provided
- Where management had identified shortfalls, such as record keeping, this had been addressed with staff.
- People and staff told us how they worked with others to enhance the care and support for people, such as accessing local colleges and rehabilitation centres. One person told us how the provider had, "Given them a future to look forward to." We could see it was clear from staff and management that their passion was to enhance people's quality of life.