

# Autism Initiatives (UK)

# Riverside Close

## **Inspection report**

8 Riverside Close Bootle Liverpool Merseyside L20 4QG

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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?	Outstanding 🌣
Is the service responsive?	Good
Is the service well-led?	Good

# Summary of findings

### Overall summary

#### About the service:

Riverside Close is a is a residential care home. This service supports people with autism; The service is registered to care for three people; there was one person living at the service at the time of the inspection.

People's experience of using this service:

The service applied the principles of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using this service reflected the principles and values of Registering the Right Support in the 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.

We saw many examples where staff had supported people to become more independent, make choices and increase their physical and emotional wellbeing. With staff support and by increasing their understanding, personalised daily routines were established, reflecting people's preferences and healthy eating was promoted.

Riverside Close is located in an area that enabled people using the service to participate in their own local community. Good local transport links enabled people to travel independently to many community facilities and places of interest.

The service was highly effective at promoting people's independence. People had made significant achievements, made possible by the dedication and persistence of staff. This included personal care and daily activities such as laundry, cleaning their home, shopping, preparing snacks and drinks.

Staff demonstrated great skill and tireless patience when working with a person to increase their skills and knowledge in daily activities. People were encouraged and supported to follow a healthy lifestyle; they chose and planned their meals and prepared their own drinks and snack. People were offered choice and control and consented to their care and support.

Staff had worked exceptionally hard in relation to developing effective communication with a person. This meant that they were able to make their own decisions about their support; staff ensured they were supported to make choices on a day to day basis. Pictures depicting activities, places, people and meals were used, together with picture boards to demonstrate the day of the activity.

Risks that people faced had been assessed and those identified were safely managed. Staff showed an

excellent understanding of their roles and responsibilities of keeping people safe from avoidable harm. Medicines were managed safely by appropriately trained staff. The person who used the service self-medicated. The person had a locked facility in their room to store the medicines. The environment was safe and in a good state of repair and decoration.

The leadership of the service promoted a positive culture that was person-centred and inclusive. We received positive feedback about the quality of care and support people received and the overall management of the service from people's relatives. The registered manager and the staff team showed a desire to improve on the service provided and in turn the quality of life experiences for the people at Riverside Close.

Effective systems were in place to check the quality and safety of the service.

The service met the characteristics of Good in most areas, rated Outstanding in Caring; more information is in the full report.

#### Rating at last inspection:

At the last inspection the service was rated Good (Report published 3 November 2016).

#### Why we inspected:

This was a planned inspection to confirm that this service remained Good.

#### Follow up:

We will continue to monitor the service through the information we receive. If any concerning information is received, we may inspect sooner.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

# 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 remained safe	
Details are in our Safe findings below.	
Is the service effective?	Good •
The service remained effective	
Details are in our Effective findings below.	
Is the service caring?	Outstanding 🌣
The service was exceptionally 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.	



# Riverside Close

### **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 was conducted by an adult social care inspector.

#### Service and service type:

Riverside Close is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (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:

The inspection took place on 30 and 31 May 2019 and was announced. We gave the service 48 hours' notice of the inspection visit because it is small, and the manager is often out of the office supporting staff. We needed to be sure that they would be in.

#### What we did:

Prior to the inspection we reviewed the information we held in relation to Riverside Close. This included any statutory notifications sent to us by the registered provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send to us by law.

Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. The provider had completed a Provider

Information Return (PIR). The PIR is information providers must send us to give us key information about the service, what it does well and improvements they plan to make. We took this into account in making our judgements in this report.

We also considered any information received from the public and professionals. We used this information to plan our inspection.

During the inspection we spoke with the registered manager, a support worker and the area manager. We looked at the person's care files, medicine administration processes, and other records relevant to the quality monitoring of the service.

We undertook general observations of the home over the course of the inspection, including the general environment and bedroom of the person who lived at Riverside Close.

After the inspection we spoke with two relatives and a social care professional.



### 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

• Staff continued to receive safeguarding training and had access to relevant information and guidance about how to protect people from harm. Staff were confident about how to report safeguarding concerns.

Assessing risk, safety monitoring and management

- Individual risks to people had been assessed and provided detailed information in order for staff to keep people safe.
- Staff knew people's identified risks well and were able to support people during an activity and when out in the community in a safe way.
- Risks to people were regularly reviewed and records updated to reflect any changes in identified risks.
- Regular safety checks were completed on the environment and equipment people used to ensure it remained safe.
- Personal Emergency Evacuation Plans (PEEPs) provided guidance for staff to safely evacuate people in an emergency.

#### Staffing and recruitment

- Safe recruitment processes continued to be followed.
- Many of the permanent staff had worked at the home for many years which allowed for consistency in the support provided to the person in the home.

#### Using medicines safely

- Medicines continued to be managed safely by appropriately trained staff.
- The person who used the service was supported to manage their own medication. The person had a locked facility in their room to store the medicines. One medicine was stored in the staff office.
- Medication was administered in conjunction with guidance and instructions; medication administration records (MARs) were appropriately completed by both staff and the person. Protocols for administering 'when required' medication were place.
- Routine medication audits were completed.

#### Preventing and controlling infection

- Staff received training around preventing and controlling the spread of infection and had access to relevant guidance and information about good infection prevention and control.
- All areas of the home were clean and well-maintained.

Learning lessons when things go wrong

- A record of any accidents and incidents that occurred was kept and reviewed regularly with the staff team to identify any patterns or trends so that changes or improvements could be made or introduced to people's support.
- Staff led by the registered manager used the Autism Initiatives "Five-point framework" which "places the person at the heart of their support and enables staff to think about how they must change their approach to best support the person. This person-centred approach had seen positive changes and reduced incidents. Staff we spoke with described this approach and how it was put into practice.



### 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

- The service applied the principles of Registering the Right Support and other best practice guidance. They ensured that people who used the service live as full a life as possible and achieved the best possible outcomes that included control, choice and independence.
- Support plans identified goals and people's wishes and were reviewed regularly to further develop people's independence.
- Assessments of people's care and support needs were completed in good detail and provided guidance for staff to support people based on their needs and choices and the values underpinning Registering the Right Support.
- Staff knew people well and how to best meet their needs.

Staff support: induction, training, skills and experience

- Staff were seen to be competent, knowledgeable and skilled in their role and supported people effectively.
- Training was provided for staff throughout their employment to maintain skills and knowledge. Staff told us that training related to autism that was provided for staff had improved and helped them in the support they provided.
- Staff received regular supervision and an annual appraisal.
- Staff told us they felt supported on a day to day basis by the senior staff.

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

- People continued to be supported and encouraged to maintain a healthy balanced diet and were provided with regular food and drinks throughout the day.
- Staff were knowledgeable of people's individual dietary needs and preferences.
- There was evidence the person was fully involved in the choosing of their meals and the preparation and buying of ingredients.

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

- The home was maintained to a good standard. Redecoration and repairs were attended to in a timely way by the landlord. The bathroom was in need of updating and a refurbishment was being planned.
- Bedrooms were furnished and decorated to suit people's individual tastes.

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

- People continued to be supported to maintain good health. Regular appointments were made with local doctors and health clinics.
- Staff responded promptly to people's changing needs. Records showed staff had engaged well with health care professionals, to ensure that people's needs were met as effectively as possible.
- Relatives confirmed that their family member's physical health needs were being met.
- Staff continued to work closely with local day care providers to provide consistent and effective support.

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).

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

- The service continued to work within the principles of the MCA; DoLS applications had been completed appropriately and submitted to the relevant authority.
- Staff ensured that people were involved in decisions about their care.
- People had given consent which was recorded.

# 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 truly respected and valued as individuals; and empowered as partners in their care in an exceptional service

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

- Staff had worked exceptionally hard in relation to developing effective communication with a person. This meant that they were able to make their own decisions about their support; staff ensured they were supported to make choices on a day to day basis. This helped the person to plan their lifestyle.
- Pictures depicting activities, places, people and meals were used, together with picture boards to demonstrate the day of the activity.
- People had regular 'consultation meetings' with staff to discuss any issues, changes to their activity programme. A person chose to write their wishes and preferences down for staff, which was kept as a record.
- Staff went the extra mile for people, for example working flexibly to enable people to make changes in their usual weekly activities. For example, if a person decided they did not want to attend their usual day service. Staff support was changed, rotas altered, and support was provided to facilitate this for the person. This helped reduce anxiety because they did not have to attend a day service when they did not wish to.

Respecting and promoting people's privacy, dignity and independence

- The service was highly effective at promoting people's independence. People had made significant achievements, made possible by the dedication and persistence of staff. This included personal care and daily activities such as laundry, cleaning their home, shopping, preparing snacks and drinks.
- A significant achievement had been made possible by the dedication of the staff to help a person to achieve their goal. An exceptional level of thought had gone into planning this with clear and detailed care plans in place to help the achieve their goal. Through a clear structure staff worked with the person to understand about physical health issues, learned to use a computer and online shopping. Staff met with the person regularly, and effective communication was achieved using the person's preferred method and staff reflecting to ensure they fully understood the person's views. Routines were established to assist the person in completing tasks successfully and on a regular basis.
- Changes in a person's physical and emotional wellbeing had had an extremely positive impact on the person. For example, Staff demonstrated great skill and tireless patience when working with a person. With limitless encouragement from staff the person developed a good sleep pattern and evening routine; with staff encouragement they introduced healthy food into their diet and increased the amount of exercise they took. These choices have led to a person having an understanding of the benefits of these changes on their well-being, reduced their stress and helped them feel in control.
- A social care professional told us they had seen the results of the positive impact of healthy living and wellbeing in the person. They said," [Name] makes us aware of the healthy eating option they want now instead of having a takeaway meal. They are more confident now in telling us their choices and

preferences."

- The registered manager demonstrated outstanding kindness towards a person, who was afraid of dogs. They worked with the person to overcome their fear. We were told of the step by step process undertaken in order to do this. We saw photographic evidence which demonstrated the fear was no longer there and the person enjoyed spending time with dogs. This had reduced the person's anxiety when out in the community, as they were no longer fearful of meeting a dog and were able to thoroughly enjoy their time outdoors.
- Staff demonstrated great skill and tireless patience when working with a person to choose new activities. Staff encouraged the person to write down how they felt about the activity and any preferences or changes they wished to make.
- Staff spoke in an extremely respectful manner about people. They spoke positively about the achievements in independence people had made in recent months.
- People spent time in their bedrooms or a small lounge to enjoy quieter time in private, to enjoy music, drawing and painting.
- People were able to lock their bedrooms when they were not in the home to keep their possessions safe and secure.

Ensuring people are well treated and supported; respecting equality and diversity

- There was an exceptionally strong and visible person-centred culture with staff going out of their way to ensure people were treated equally and fairly.
- People continued to receive good care and support from staff who clearly knew them well.
- Staff had developed exceptionally strong relationships with people and were seen to be genuinely kind and compassionate. People were fully involved in decisions about new staff. Staff were appointed based on how well they got on with the person, their temperament and their personality.
- A person had said, "I love living at Riverside Close; I love the staff because they are kind and listen to me. Staff are patient."
- People were supported to maintain relationships with their family members. Staff worked with family members to ensure visits to them were undertaken several times a year. Staff supported people to buy cards and gifts to send for birthdays and for Christmas.
- Relatives spoke positively about the support their family member received from staff. One relative said, "[Name] is happy and gets on well with the people looking after him. As far as I can see the service is excellent."



## 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

- The care people received continued to be person centred and based on their individual needs. Staff knew people's likes, dislikes and preferences and used this knowledge to care and support people in the way they wanted, such as, how they preferred to spend their time.
- Care records were detailed and contained all relevant and up-to-date information regarding people's needs. The service ensured that all relevant records were reviewed in a timely manner when people's needs changed so that staff had access to the most up-to-date information.
- Family members felt involved in care planning; they told us they were always kept informed of any changes or concerns. A relative told us, "We have good contact from staff; communication is good."
- People were supported to access a range of activities in the community on a regular basis. Activities were planned around people's needs and preferences. These included, pub lunches, walks to local places of interest, and regular visits to family members.
- The service continued to meet the communication needs of people with a disability or sensory loss in line with the Accessible Information Standards.

Improving care quality in response to complaints or concerns

- The registered provider had a complaints policy and procedure which was made available to people. However, no complaints had been made since our previous inspection.
- The registered manager and staff were in regular contact with relatives using their preferred method of contact. Relatives reported they were pleased with the support provided. One person told us, "Staff are always available to answer any question I may have. [Name of family member] gets on very well with them and any small problems which may arise are resolved very quickly."

End of life care and support

• At the time of the inspection the service was not supporting anyone with end-of-life care.



### 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.

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

- The service continued to be well led by a registered manager and team of support staff who were experienced and had worked at the service for many years. They understood their role and what was required to ensure the service provided good care to people.
- The registered manager provided direct support for people as well as managing the service. They had an excellent understanding of the person's needs as well as sufficient time to complete their managerial responsibilities.
- The registered manager was clear about their responsibilities for reporting to the CQC and the regulatory requirements. Risks were clearly identified and escalated where necessary.
- Staff received supervision and support from the registered manager to develop their practice.
- Information related to people who used the service was stored securely and treated in line with data protection laws.

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 and staff promoted a culture of person-centred care by having a clear set of aims and values, engaging with everyone using the service and family members.
- Relatives gave very positive feedback about the registered manager.

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

- People living at the service met with staff regularly to discuss their support; this included any activities they wanted to do. Staff used photographs and other communication aids with those who required them.
- Family members were in regular contact with staff throughout the year to discuss the service their relative received. Formal feedback in the form of questionnaires was sought from family members each year.

Continuous learning and improving care

- Quality assurance systems were in place and used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the management team and registered provider to identify areas of improvement.
- Staff meetings and daily handover meetings were opportunities to discuss any incidents or ways to improve the support people received or increase people's independence.

Working in partnership with others

- The service continued to involve people and family members in discussions about the support provided.
- The service worked closely with other agencies to achieve good outcomes for people. This included liaising and having regular contact with day services, and consulting health care professionals. The provider's learning and development team provided clinical support for team members and were a source of help and assistance for the staff team.