

Polesworth Group Homes Limited

# Polesworth Group Pooley Heights

## Inspection report

Pooley Heights, Pooley Lane  
Polesworth  
Tamworth  
Staffordshire  
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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

We inspected this service on 11 December 2018. The inspection was announced and carried out by one inspector and an expert by experience.

The service is a 'care home' operated by Polesworth Group Homes; a non-profit and independent provider of support for people with learning disabilities. The service, Pooley Heights, is one of eight services provided by Polesworth Group Homes Limited. The service provides short stay accommodation with personal care for up to six adults, at any one time, living with a learning disability. People in residential care homes receive accommodation and personal care as a 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 was providing support to people on a short stay basis to offer people and their usual carers a break from their usual routine. At the time of our inspection visit, five people were on a short stay at the home.

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.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons.' Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At our last inspection in April 2016 we rated the service as Good. At this inspection, we found the quality of the care had been maintained and people continued to receive a service that was safe, caring, effective and responsive to their needs. The rating continues to be Good.

The provider adjusted staffing numbers to meet the needs of people using the service for a short stay; to ensure sufficient staff were on shift to meet their individual needs. Staff had the appropriate levels of skill, experience and support to meet people's needs and provide effective care. Staff knew people well and how to keep them safe because risks had been assessed.

Staff knew what action to take in the event of an emergency. The provider checked staff's suitability to deliver care and support during the recruitment process. Staff understood their responsibilities to protect people from the risks of abuse. Staff had received 'safeguarding' training and knew how to raise concerns under the provider's safeguarding policies. The registered manager and provider understood and followed their legal responsibilities when safeguarding concerns were identified to them.

At the beginning of each short stay, important information was updated about people so staff had the information they needed. People had individual plans of care and were able to take part in individual

activities according to their preferences. Staff ensured people achieved positive outcomes during their short stay.

People were encouraged and supported to maintain good health through healthy eating. Staff supported people to access healthcare services, if needed, during their short stay. People received their prescribed medicines from trained staff. Staff had received training in the Mental Capacity Act 2005 and worked within the principles of the Act. Managers understood their responsibilities under the Act and when 'best interests' meetings should take place.

Staff were compassionate, kind and caring toward the people they supported. People's privacy and dignity was respected and staff took opportunities to promote people's independence. People and relatives were complimentary about the service and had no complaints. Staff felt valued and supported by the provider and registered manager and were happy in their job role.

The registered manager and provider checked the quality of the service to make sure people's needs were met safely and effectively. Feedback was encouraged from people and relatives. The registered manager and provider understood their regulatory responsibilities.

Further information is in the detailed findings below.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Polesworth Group Pooley Heights

## **Detailed findings**

### **Background to this inspection**

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection took place on 11 December 2018 and was announced. We gave short notice because this is a short stay service and we needed to make sure people were currently using the service and staff would be available to speak with us. One inspector and an expert by experience by undertook this inspection. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of service. The expert by experience on this inspection had experience of learning disabilities services.

Prior to our inspection visit, we reviewed the information we held about the service. We reviewed statutory notifications sent to us from the provider. A statutory notification is information about important events which the provider is required to send us by law. The local authority told us they had no current concerns about the service.

We spent time with people and observing communal areas where people interacted with staff. This helped us judge whether people's needs were appropriately met and to identify if people experienced good standards of care.

During the inspection we spoke with three people currently using the service. We spoke with four relatives of people who had recently used the service. We spoke with five care staff, the administrator and the provider's chief executive officer. The registered manager was on planned leave during our inspection visit.

We reviewed four people's care plans, daily records and medicine administration records. We reviewed

feedback about the service that people and their relative had recently given following short stays. We also looked at the management records of the quality assurance audits the registered manager, chief executive officer and provider; Board of Trustees, made to assure themselves people received a safe, effective quality service.

# Is the service safe?

## Our findings

At our last inspection we rated this key question as Good. At this inspection we found people continued to receive a service that was safe. The rating remains Good.

People told us they felt safe during their short stay at the home because staff 'looked after them.' Staff had been trained in safeguarding people from abuse and told us they would report any concerns to the registered manager. One staff member told us, "I wouldn't delay reporting a concern to the manager or higher up. If needed, I'd phone you at CQC."

The provider had a system of recruiting staff to ensure their suitability to care and support people safely. Two staff had recently been recruited and their staff files showed pre-employment checks had been completed by the provider.

Risks of harm or injury to people were assessed and staff knew how to keep people safe because they knew them well. For example, one person was described as not having road safety knowledge and staff should support them. However, the level of support was not described in individual risk management plans and the provider's chief executive officer assured us more detail would be added to risk management plans to describe the level of individual support people needed from staff.

There were sufficient staff on shift to meet people's needs. The provider's chief executive officer explained they adjusted staffing numbers to meet the needs of people using the service for a short stay. Staff told us there were 'always enough staff on shift' and one staff member said, "Some people have one to one support during their short stay because their needs are higher, other people are more independent. We always know what shifts we are on and it is well organised by the manager."

There was a fire alarm system in place at the home. People had Personal Emergency Evacuation Plans (PEEPS) in place which informed staff and emergency services of the level of support people would need in the event of an emergency.

Medicines were stored and handled safely by trained staff, who had their competencies assessed by the registered manager. People brought their own medicines with them for the duration of their short-stay. For each person's short stay, staff recorded people's medicines on a new medicine administration records (MAR) and we found these had been completed correctly. Protocols were in place to guide staff about 'when required' medicines should be given to people, to ensure a consistent approach was taken.

Staff knew how to record accidents and incidents so that learning could take place when things went wrong.

The home was clean and tidy and people were protected from the risks of infection. Staff understood the importance of using personal protective equipment (PPE), such as gloves and aprons. Staff supported people with effective hand-washing techniques and to use PPE when, for example, they prepared food for

themselves.



## Is the service effective?

### Our findings

At our last inspection we rated this key question as Good. At this inspection we found staff continued to give an effective service to people. The rating remains Good.

People were relaxed with staff who knew them well. Positive interactions took place between people and staff during our inspection visit. People's care needs were assessed and individual care plans were in place.

An induction programme supported new staff in their role. Two new staff told us they felt 'very supported' in their role. Staff were supported by individual and team meetings and felt they had received the training they needed. One staff member told us, "We do refresher training, the manager is supportive and there is an on-call system if we need support." Staff felt valued by the provider, one staff member told us, "I just received my long service (25 years) award. I was really pleased."

We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA), whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. The provider's chief executive officer and registered manager understood their responsibilities under the Act. There were two people with an approved DoLS and 44 applications to restrict someone of their liberty had been applied for. Staff understood their role in protecting people, and worked within the principles of the MCA. People confirmed to us that staff asked for their consent before, for example, supporting them with personal care.

People's nutritional needs were met. A cook told us, "There is a planned evening meal menu but we always check with people it's what they like. If not, other options can always be offered." A staff member supported one person to make choices about what they would like for their lunch, which they showed us they could prepare, telling us, "I like to cook." One person had been identified as being at risk of urine infections and staff encouraged this person to drink and their fluid intake was recorded so staff could monitor their overall intake was sufficient.

Staff had information about people's GP and told us they would support people to visit their GP, if needed, during their short stay. Overall, people were supported to access healthcare professionals by their relatives during their usual routine. Relatives told staff about important health care changes when their family member arrived for their short stay at the service.

People told us they enjoyed their short stay at the service. One person told us, "I really like it here, I'll come again." Most bedrooms were ensuite, and there were shared communal lounge and dining areas, the design of the service met people's needs.

## Is the service caring?

### Our findings

At our last inspection we rated this key question as Good. At this inspection we found staff continued to have a caring approach toward people who were happy living at the home. The rating remains Good.

Peoples' and relatives' verbal, and written feedback, about the service was positive. People spoken with told us staff were 'always kind' to them. Relatives made positive comments to us, one told us, "The staff are very caring, always welcoming." One relative's written feedback said, "Staff are always kind to [name] and we have no worries."

People were actively encouraged to be involved in making decisions about their care and support and how they spent their time. One staff member told us, "Most people continue with their usual day care arrangements during their short stay with us, this means some people go to their day centre or college. Other people might have more free time, so together we plan what they are going to do."

Staff knew how to promote people's independence. During our inspection visit, one person was supported to make an omelette for their lunch. This person was relaxed with the staff member who supported them, we heard them chatting and laughing together as the staff member showed patience and encouragement toward them. Appropriate praise was given as the person achieved the steps in preparing and cooking their lunch.

People told us, and we observed, staff respected people's privacy and dignity. When bedroom doors were closed, staff knocked on the door before entering. Bedroom door keys were available for anyone who wished to have one during their short stay.

## Is the service responsive?

### Our findings

At our last inspection we rated this key question as Good. At this inspection we found staff continued to be responsive to people's needs. The rating remains Good.

People's needs were assessed and everyone had an individual plan of care. People also had personalised activity plans which staff used to help people achieve their goals and positive outcomes during their short stay. One staff member told us, "For every activity I support a person with, I take photographs. I use the photographs to help people talk about the activity, what they enjoyed or didn't enjoy about it or as a tool to decide what they want to do on a certain day." During our inspection visit, we saw people's activity plans were used by staff and one person smiled at their photographs as they showed us their plan.

During people's short stay at the home, they could personalise their bedrooms. One person had taken their own duvet covers, another person had displayed their DVDs in their bedroom. One person had a laminated poster of images they choose which helped them to identify which bedroom was theirs; during their short stay and we saw this was displayed on their bedroom door. People told us they could make decisions about what they did. During our inspection visit, three people chose to attend their usual day centre and one person chose to visit a museum with a staff member.

The 'Accessible Information Standard' (AIS) aims to make sure that people who have a disability, impairment or sensory loss get information that they can access and understand and any communication support they need. Staff recognised people had different levels of understanding verbal, written or pictorial information. People's care plans provided guidance to staff about people's preferred communication. Staff understood how to use one person's pictorial images, these had velcro on them so they can be attached to this person's activity plan as a reminder for them about what was happening during their day.

People were encouraged to get involved in their local community. Certificates of recognition had been given to people who had chosen to clean a local War Memorial. Community feedback had been given about the valuable contribution people had made and included, "Nice to see people from the local community doing this tidy up."

The provider's 'how to complain or raise a concern' information was displayed for people in both a written and pictorial format. People and relatives were complimentary about the service and told us they had no complaints. Staff knew how to respond if people or their relatives raised a complaint.

The registered manager encouraged feedback from people about their short stay and easy read pictorial feedback surveys were completed with people at the end of each of their short stays. Comments from people were positive and included, "I enjoy coming here. I make new friends."

## Is the service well-led?

### Our findings

At our last inspection we rated this key question as Good. At this inspection we found the service continued to be well led, with the provider and registered manager ensuring a safe, effective, caring and responsive service was provided to people. The rating remains Good.

During our inspection visit the registered manager was on planned leave. Staff told us the registered manager was based at the home and they felt well supported by him. One staff member said, "If the manager is not here, we can always phone [the chief executive officer's name] if we need support." The provider understood when notifications needed to be sent to us; about specific events that happened at the service.

Feedback was encouraged from people and relatives. Relatives had been invited to a 'Carer's Meeting' during May 2018, where positive comments about the service were given. For example, one relative said, "I don't think you could do better than what you do now." Visiting healthcare professionals were invited to give comments about the service and one had recorded there was a 'homely atmosphere' and staff had a 'professional manner.'

Since our last inspection, people and relatives were offered the opportunity to take part in the Provider's fun day; celebrating 35 years of Polesworth Group Homes. Staff described the provider's BBQ event, during August 2018, as an 'excellent event' which people, relatives and staff enjoyed spending time together.

There was an effective system of internal audits and checks undertaken within the home to ensure the safety and quality of the service was maintained. The registered manager had identified areas where improvements were needed and required actions had been implemented. For example, a medicines audit completed during October 2018, had identified detailed protocols were required for people's 'when required' medicines and we found these had been completed. A 'new items required' audit had identified some people would benefit from dining room chairs with arms to aid them to stand up and these had been purchased. The provider's chief executive officer visited the home to ask people their feedback about their short stay and the provider's Board of Trustees undertook frequent quality monitoring visits to the service and actions for improvements were recorded.

It is a legal requirement that the provider's latest CQC inspection report rating is displayed at the service. This is so people, visitors and those seeking information about the service can be informed of our judgements. The provider had displayed the rating. Polesworth Group Homes has a website which provides information about their services and a link to their latest CQC rating.