

Voyage 1 Limited

43 Station Road

Inspection report

Wraysbury
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

43 Station Road is based in Wraysbury. The service is registered to provide care for up to six people with learning disabilities. At the time of our inspection 4 people were living at 43 Station Road.

This inspection was undertaken on the 30 December 2015 and was unannounced.

43 Station Road had a registered manager in place. 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.

43 Station Road is a small service which is located close to local amenities. During our inspection, people were supported to access the outside community frequently as there were enough staff to assist on outings.

We found the service to have a calm, relaxed feel. We observed that people appeared settled and happy living at 43 Station Road. The home was maintained well and was kept clean. One relative told us they felt this was the best service their loved one had ever lived at.

People were supported by staff who knew their needs well. Staff were able to explain how they supported people in a person centred manner and how they promoted people's choices. This was consistent with information we found in people's care plans.

Staff told us they felt supported in their roles, both as a team, and by management. We found appropriate processes in place to ensure staff were supported, for example, training provision, supervision and a formal induction for new staff members.

A newly appointed deputy manager had recently commenced employment. They advised us of ways they intended to make the service better and were working closely with the registered manager to put improvements into place, for example, a new sensory room and garden.

People were protected from risk of harm as staff were aware of how to raise concerns if they suspected potential abuse. Where people received medicines, these were administered by staff who were trained and deemed competent to do so.

We have made a recommendation around ensuring robust recruitment checks are in place.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement ●

The service was not always safe.

Recruitment checks were not always completed in line with the regulations.

Clear risk assessments and guidance were in place on how to protect people.

Staff were aware of how to protect people against potential abuse and harm.

Is the service effective?

Good ●

The service was effective.

Staff received effective training, supervision and inductions to undertake their role.

The service followed the principles of the Mental Capacity Act (2005).

People were supported to remain healthy and well through diet and health appointments.

Is the service caring?

Good ●

The service was caring.

Staff were supported by people who knew their needs well.

People were treated with dignity, respect, kindness and care.

People were supported to access advocacy services if required.

Is the service responsive?

Good ●

The service was responsive.

Care plans contained good levels of detail on how people wished to be supported.

Complaints were managed within the service.

People were supported to access a range of activities.

Is the service well-led?

Good ●

The service was well-led.

There was an effective management structure in place.

Management had clear oversight of the service.

Staff and relatives were complimentary about how the service was managed.

43 Station Road

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 checked 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.

The inspection was carried out by an inspector. This inspection took place on the 30 December 2015 and was unannounced. We checked to see what notifications had been received from the provider since their last inspection. Providers are required to inform the CQC of important events which happen within the service in the form of a notification. The provider was not asked to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we spoke with the manager; the deputy manager, two staff and three relatives of people who used the service. We looked at copies of care plans, medicine records, quality assurance documents, health and safety records and made observations of staff interactions with people who used the service. At the time of our inspection, there was no one living at the service who was able to verbally communicate.

Is the service safe?

Our findings

Relatives we spoke with told us they felt people were safe living at 43 Station Road. One relative commented "I think X is very happy here. X is 100% safe. It's the best place X has lived at." Another relative commented "I think X is protected."

We were advised of the current staffing levels at 43 Station Road and were provided with the last four weeks rotas. We found staffing numbers reflected the support needs of people living at 43 Station Road. At present, a new deputy manager had been recruited and the staff team consisted of full time, part time, bank and agency staff. Staff were consistently available and visible, and when requests were made, these were met in a timely manner. We also found there were enough staff to undertake social activities such as accessing the outside community and attending appointments.

Staff we spoke with were knowledgeable on how to respond to allegations of abuse, and how they would ensure people were protected against the risk of abuse. All staff working within the service had received safeguarding training. Clear guidance on how to report safeguarding concerns was available for staff both within the main office and communal areas. Information was also provided to people who used the service on how they could raise concerns in a way which they could understand, for example, the use of 'Picture Exchange Communication Systems' (PECS).

We found clear risk assessments in place within people's care plans. Risk assessments clearly outlined potential risks for example, seizures, and how these would be managed. Each risk identified was given a risk rating which determined how often the risk may occur, and what action should be taken by staff to eliminate or reduce the risk. We also found clear risk assessments around potential behaviours, for example, the use of minimal physical restraint when a person displayed aggressive or unsafe behaviour. Staff were able to explain what training they had received, and what action they would take to prevent the person coming to harm. We compared this with people's care plans and found it to be in line with their care plan and risk assessment.

Medicines were managed safely within the service. Each person had their own medicines profile which outlined peoples conditions and what medicines they received. Before staff were able to administer medicines, we saw evidence that they had been assessed as competent to do so. Clear guidance was provided on the use of 'as required' medicines and regular stock checks were undertaken. Each time medicines were administered, two staff signed to say they had witnessed the medicine being taken and that it was the correct medicine. This meant potential risks associated with medicine administration were alleviated. Where controlled medicines were used, these were safely stored and locked away in line with best practice.

We found there to be appropriate health and safety checks in place and a clear fire procedure (including personal evacuation plans) and regular fire checks undertaken to ensure people's safety.

We looked at recruitment files for three staff members. Although we found the majority of checks were in

place such as proof of identity, disclosure and barring checks (DBS) and references, we did find some gaps in employment histories were not explained and staff medical histories were not always completed. We also spoke with the manager about agency profiles (including a photograph) being made available to the service so they were aware that when agency staff were used, they knew who they were.

We recommend that the service ensures there are robust recruitment checks in place which are monitored to identify potential gaps.

Is the service effective?

Our findings

New staff working at 43 Station Road had begun to use the new 'care certificate' induction. The care certificate outlines set standards which new staff were required to meet before being signed off as competent. At the time of our inspection, new staff members were being supported to complete the care certificate in line with their probation period. Staff told us they felt they had received an effective induction which prepared them to undertake their roles. One staff member told us "I had plenty of time to shadow and read care plans before working on my own. It really helped me."

Staff received a mixture of online training and face to face training. We were provided with a copy of all staff training and found staff were receiving training in line with what the provider deemed mandatory. Staff training documents clearly outlined when staff training was due to expire and when training had been successfully completed. We also saw evidence that staff regularly had their competencies assessed to ensure their knowledge and skills were relevant and up to date. Staff we spoke with told us they felt the training was very good and prepared them for their roles. Comments included "I enjoyed the training and would be supported to access further training if I wanted" and "The training is very good. It's really helped me."

We found staff received effective supervision in line with the provider's supervision policy. Staff told us they regularly received both formal and informal supervision. We looked at copies of supervisions and found they outlined a clear agenda, and demonstrated a two way discussion between supervisor and supervisee.

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 when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS).

We found the service was working in line with both the MCA and DoLS. Where the provider felt people were being deprived of their liberty, appropriate applications had been made to the local authority. The registered manager was currently waiting on applications to be assessed but had ensured they had made applications as required by the Act. We looked at how people's capacity was assessed and how assessments demonstrated decisions were made in people's best interests. We were provided with evidence of mental capacity assessments and best interest meetings where it was assessed the person lacked capacity to make a specific decision for example, when required medical treatment. All people had their own 'decision making' care plan which outlined people's mental cognition, how this may affect their ability to make specific decisions and how staff were to support people to make decisions in their best interests. We found all staff working at 43 Station Road had good knowledge of the MCA and DoLS and how this impacted the people they supported.

People were supported with their nutrition and hydration needs. Menus were clearly displayed and we were shown how people were supported to make decisions about what food was provided. Staff were knowledgeable in regards to people's nutritional needs, for example, those who had good appetites and those whose food intake needed monitoring. For example, we were informed of one person whose sugar intake was being monitored due to concerns raised about the amount of sugar the person was using. Staff showed us how they supported the person to maintain a healthy sugar intake whilst promoting the person's choices and rights. We observed lunch being prepared and served during our inspection and found the meal was well received by people living at the service. People were supported with appropriate equipment such as plate guards and specialised forks and spoons to help people to be independent when eating. People were also supported to maintain a healthy diet by adding salads to people's meals. Where required, food diaries were in place to monitor food intake, and people's weights were recorded monthly. We saw people were offered regular fluids throughout the day and staff supported people to make their own drinks where possible.

We found the service had a calm and relaxed atmosphere. People were able to access all areas of the service freely and the home appeared well maintained and clean. The service was close to facilities and had a 'homely' feel. People had access to a large rear garden and people's rooms were decorated as they wished. We saw the service had hung pictures of previous holidays which people had taken around the home and staff pictures were available for people and visitors.

People were supported to maintain their health and well-being. We saw people were regularly supported to attend healthcare appointments such as dentists and doctors. Where appointments were undertaken, outcomes of appointments and follow ups were recorded appropriately. The service also ensured they involved specialists in people's care when required, for example, speech and language therapists and dietitians. Each person had their own personal hospital passport which meant, in the case of admission to hospital, the passport would accompany them and gave a clear outline of their medical needs.

Is the service caring?

Our findings

Relatives we spoke with were complimentary about the care provided at 43 Station Road. One relative commented "X has settled the best here. We think it's because it's a smaller home. I think X is very happy here. You can tell by X's reactions. X's behaviours have improved hugely. It's like a family atmosphere and X has made a really good bond with one staff member. X has lived in quite a few places and this is the best place X has lived." Another relative commented "The staff are always friendly and polite."

We made observations during our inspection including the lunch period. We found staff were attentive and kind towards people. Staff frequently acknowledged people and it was clear that staff knew people's needs well, for example, when a person exhibited a behaviour, staff knew what this meant and how to respond. Staff frequently asked people if they were ok and if there was anything they needed. We observed good practice when staff recognised a person was becoming agitated, so supported them to undertake an outside activity to relieve any distress and to make the person comfortable and settled.

Staff ensured they protected people's dignity and privacy. Staff knocked before entering people's rooms and ensured that when personal care was provided, this was done discretely and behind closed doors. Staff also ensured over lunch that people's clothes were protected by using food guards and aprons, and if people required assistance, staff responded quickly. We found people living at the service appeared relaxed, happy and had formed good relationships with staff.

Over lunch, we observed a staff member supporting a person to eat their lunch. The staff member sat next to the person so they were at eye level and took their time in helping the person with their lunch. The staff member frequently asked if the person was enjoying their lunch and recognised how to promote the person's dignity by providing small mouth fulls at a pace which the person could manage. The lunch period appeared calm and relaxed.

Staff told us they enjoyed their roles and why they enjoyed working at 43 Station Road. One staff member commented "I love my work. It's really important to me to know that I am making a difference to people's lives. For example, we had one person who was displaying quite challenging behaviours. We have all worked really hard to get to know the person's needs and how they want to be supported and now the behaviours have reduced. It's very rewarding." Another staff member told us "It's a very supportive team and I feel I have got to know the people living here well. It's about ensuring their safety and respecting and promoting their choices to ensure people live a fulfilled life."

People were supported to access advocacy services if needed. We saw one person had been supported to access an advocate, and information on advocacy services was displayed for people in the home. (Advocates are people independent of the service who help people make decisions about their care and promote their rights.)

Is the service responsive?

Our findings

Care plans were detailed and comprehensive. We found care plans were person centred and focused on the person's wishes, likes and dislikes. We found clear guidance was in place on how people wished to be supported and how staff should support them. Important social aspects of people's lives were recorded in their care plans, for example, a relationship map which outlined important social contacts and a one page profile which outlined areas such as "What's important to me" and "How to support me."

We found guidance on how people were to be supported was clear and available. Guidance was provided on areas such as personal care, activities, food and nutrition and communication. Clear guidance was provided on how to manage potential behaviours for example "If the person does this – it may mean this – we (staff) should do this." We also found clear information on people's religious needs and requirements.

We saw regular key worker meetings took place which involved the allocated keyworker completing a monthly review with the person they supported. This gave staff and the person they supported an opportunity to reflect on their care for the previous month and what plans and goals would be set for next month. Care plans were reviewed as required and amended to reflect people's current needs. Staff and relatives told us they were involved in care planning and reviews where possible. We found regular meetings took place within the service.

Complaints were managed well within the service. Since the last inspection, one complaint had been received. We saw appropriate action had been taken to resolve the complaint and actions had been put in place to learn from the complaint. Information on how to complain was displayed within the communal hallway and was provided also in an easy read format for people to understand.

During our inspection, we saw many activities were offered to people. Some people attended local day centres and others were being supported to visit the local town or to go for a walk to the local park. One relative told us "The activities are good. X is always out and about. It's good exercise." We were advised that a spare room was going to be turned into a sensory room for people in the near future and the deputy manager and registered manager had discussed ways of implementing a sensory garden during 2016. We were advised people were supported to visit London during Christmas to see the lights and regular activities such as swimming were offered. The deputy manager advised us they were always looking at ways of improving activities for people and ensuring they were activities people chose to do for example, visiting the coast and the new forest.

Is the service well-led?

Our findings

Both staff and relatives were complimentary about the management of the service. Comments included "She [registered manager] is a very good person and very friendly. I have confidence in her ability", "The manager always keeps us informed of any changes in X's health. She keeps in regular contact which we find reassuring."

Comments from staff included "The manager is very supportive if I have any problems. She always listens and acts upon them and she always wants to improve the service" and "She is lovely. If I have ever had any issues she has supported me. I really couldn't ask for a better manager."

A new deputy manager had recently been appointed to support the registered manager with the day to day running of the service. The deputy manager advised us they had sat down with the registered manager and looked together at ways of improving the service. We found the deputy manager had good ideas on how improvements could be made to the service, and they told us they had been supported wholly by the registered manager in seeking ways to ensure the service was run in an effective way.

We found management had clear oversight of the service. Regular auditing was completed which ensured the quality of the service provided. Audits included areas such as medicines, internal audits and health and safety. During our inspection, the registered manager was on annual leave; however they came on their day off to attend the inspection and to support the deputy manager. We found both the registered manager and deputy manager were knowledgeable about the service and about the people who lived at 43 Station Road.

We found all staff and management were clear on the role of the Commission and our methodology for inspecting. It was clear that the manager had invested time and effort into ensuring the service was well-led. We found management were visible and supported people and staff on the floor throughout the day. When management was in the office, the door was open and people and staff were able to access them freely. A clear vision and values poster for 43 Station Road was displayed and we found staff working in line with these visions and values.

Providers are required to notify us of significant events which occur within the service. We had received appropriate notifications since 43 Stations Road's last inspection in September 2014. We found all staff were aware of the Care Quality Commission and our role in ensuring services are safe, effective, caring, responsive and well-led.