

The Disabilities Trust

Disabilities Trust - 9 Twyford Lane

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

Disabilities Trust - 9 Twyford Lane is a residential care home which supports adults with acquired brain injuries. People are supported to live as independently as possible and the service is split into three individual homes which can each occupy up to three people. Each home has a kitchen-diner and communal area for people to use, as well as private bedrooms. When we visited there were eight people living at the service.

This inspection was unannounced and carried out on 07 April 2017. At the last inspection on 07 April 2015, the service was rated Good. At this inspection we found the service remained good.

There were systems in place to keep people safe. Staff knew about abuse and there were procedures in place to record and report abuse or any other incidents which took place. Risk assessments were in place to help staff keep people safe and they were regularly updated. Staffing levels were sufficient to ensure people's needs were met and they were recruited robustly, to ensure they were of good character. Systems were in place to encourage people to manage their own medicines but also to provide support in this area if required.

Staff were provided with training and supervision to ensure they had the skills they needed to perform their roles. 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 supported this practice. People were able to choose what they wanted to eat and drink and were supported to be as independent as possible with meal preparation. They were also supported to maintain appointments with healthcare professionals when required.

There were positive relationships between people and members of staff. Staff treated people with kindness and took time to get to know them and their interests. People enjoyed the company of staff and were encouraged to be involved in decisions about their own care and the development of the service. Staff worked hard to ensure that people were treated with dignity and respect.

Care was person-centred. People received support which was tailored to their individual needs and the goals which they had set in collaboration with the service. Care plans were reviewed and updated as people's needs and wishes changed and goals were achieved. Staff supported people with social activities and events, as well as work opportunities in the local community. There were systems in place to gather people's feedback, including complaints, about the service. This was used to help the service improve.

There was a positive culture and ethos at the service. Staff were motivated by their roles and felt that they were part of the service. They were well supported by the registered manager and were able to make contributions and suggestions about ways in which the service could develop. Quality assurance procedures were in place to help the registered manager and provider assess, monitor and improve the quality of care being provided at the service.

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 remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good ●

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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 unannounced comprehensive inspection was carried out on 07 April 2017 and was carried out by one inspector.

Prior to the inspection we reviewed information we held about the service. This included a Provider Information Return (PIR) which the provider had submitted which contained information about the service and how the provider planned to develop it. We also looked at other information we had, including statutory notifications which had been sent to us by the provider. Statutory notifications are pieces of information about important events which took place at the service, such as safeguarding incidents, which the provider is required to send to us by law. We also spoke with the local authority, who have a commissioning role with the service.

During the inspection we spoke with seven of the people who lived at the service to seek their views on the care and support they received. We also spoke with four staff members who were working on the day of our visit. In addition we reviewed the records in relation to three people living at the service to ensure they were reflective of people's care needs and wishes. We also reviewed records relating to the management of the service, including those relating to staff training and development and quality assurance procedures, to see how the provider maintained and developed standards of care at the service.

Is the service safe?

Our findings

People living at the service were safe. One person said, "I have no concerns about my safety, staff know what they are doing." Members of staff had received training in terms of keeping people safe which included recognising abuse and safeguarding procedures. One staff member said, "We know what to do if we are concerned about abuse. We write everything down and report it." We saw that incidents and accidents had been reported and that there was a system in place to log safeguarding concerns and take appropriate action in response to them.

There were systems in place to assess and manage risks within the service. One person explained that staff made sure they checked everything and if something stopped working properly, it was immediately repaired or replaced. A staff member told us, "We have risk assessments in place which give us the information we need." People's care plans had specific risk assessments and there were also generic ones in place which provided staff with guidance on the action to take to reduce risks to people.

There were enough staff members to make sure people's needs were being met. One person said, "There are always staff about." During the inspection we observed that staffing levels matched those recorded on staff rotas and that there were enough to meet people's assessed needs. Records showed that the service provided continuity of staffing and that staff had been recruited following robust procedures to ensure that staff were of good character and suitable for their roles.

People were supported to take their medicines and, where possible, were encouraged to do this independently. One person told us, "Staff help me with medicines, they get it right in the morning and the evening." Staff gave people their medicine in accordance with the instructions in their care records and there were systems in place to record when medicines were given. Checks were carried out to monitor the safe storage, administration and recording of medicines.

Is the service effective?

Our findings

Staff members received the training and support they needed to perform their roles. One staff member told us, "I've just started my level three [vocational qualification] and we do our annual refresher training." The service had not had a new staff member for a number of years, however; there was a system in place to ensure that any new staff received a comprehensive induction and all staff received regular ongoing training and refresher sessions to build and maintain their skills. Staff members also received regular supervisions to enable them to discuss any concerns or development issues they may have.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The service had systems in place to ensure that people's mental capacity was assessed where necessary and took steps to ensure people were able to make their own decisions as much as was possible. People's family members were involved and procedures for DoLS were being followed.

Staff members provided people with support to maintain a nutritious and balanced diet and people were encouraged to be as independent as possible with meal preparation. One person told us, "I do some of my meals myself and help myself to drinks all day." We saw that people were able to access the kitchen in their part of the service to prepare food and drink when they wanted to. There were also menu's which had been written with people's input, which showed people what meals were planned for each day of the week.

People were also supported to attend appointments with healthcare professionals. One person said, "Staff know when my appointments are and make sure I get to them on time." Staff members showed us that appointments were recorded in a diary and people's care records to ensure they were not missed. Staff went with people to help ensure they were supported and that any instructions or directions were relayed back to the service.

Is the service caring?

Our findings

There were positive relationships between people and members of staff. One person told us, "The staff are lovely. We get on really well and we always have a good chat." People told us that staff had a good rapport with them and felt that they could exchange friendly 'banter' which helped them to feel relaxed and comfortable. During the inspection we saw that people and staff spoke and joked together as equals and saw people making drinks for staff, as well as staff doing this. This showed that people and staff worked together to ensure there was a comfortable and homely atmosphere at the service.

Staff members told us that they enjoyed working with people and worked hard to ensure they got to know each person living at the service. One staff member said, "We really get to know the residents and enjoy spending our time with them." Staff knew each person and their individual needs. They communicated with people in a patient and caring manner and worked with people to ensure they got the care they needed.

People were aware that they had care plans in place and had been involved in writing them. People also told us that they were involved in how the service was being run and felt that they were listened to when they expressed their opinions. One person told us, "We have house meetings where we can bring things up or talk about the things that we would like to do." Records confirmed that these meetings took place and that suggestions or comments were acted upon. This showed that people were being involved in the way the service was being run.

The service had taken steps to ensure that people were treated with dignity and respect. One person said, "They are all very good, they treat us just right." Staff had been trained in this area and were committed to ensuring that people's dignity was maintained. They worked to promote people's independence and encouraged them to do as much for themselves as possible. Family members and visitors were also welcome at the service and could visit whenever they wanted.

Is the service responsive?

Our findings

People were provided with person-centred care which was based on their individual needs and preferences. One person said, "They are good, they know each of us as an individual." Staff told us that they worked hard to make sure that each person's individual wishes were respected. They showed us that new admissions to the service had their needs carefully assessed to ensure they could be met. Care plans were then produced based on this information and goals were set with the person based on what they wanted to achieve. The care plans and goals were regularly reviewed and re-assessed to measure people's progress and to make sure that care plans remained current and up-to-date.

The service supported people to take part in a number of activities which they enjoyed. People told us that they did things like trips to the cinema, bowling and meals out; in addition they were supported to take on voluntary work roles in shops and centres within the local community. They explained that they enjoyed these opportunities to work as well as the social outings which they did and were grateful to the staff for the support they provided in these areas. Preferences were recorded in people's care plans along with information about the activities and work that they did. These were usually part of the goals which people had been set which demonstrated that the service worked with people to help them achieve their aims.

There were systems in place to provide the service with feedback, including complaints. One person told us, "I have never had to complain, but I would know how to if I wanted to." Staff members told us that they were open to any feedback and saw it as an opportunity to help develop the service. There were clear systems in place to receive and act on complaints and we saw that none had been logged in the past year. The service had also completed a satisfaction survey to gather and collate people's views of the service which had generated positive results. We found that these were analysed to identify any areas where the service could improve in the future.

Is the service well-led?

Our findings

There was a positive ethos at the service and an open culture. People were happy with the care that they received and staff were passionate about meeting people's needs and ensuring that their care was person-centred. One staff member said, "I love my job, I really like the people we care for and we are a great team." Staff were encouraged to be open and all were prepared to raise concerns, including using the provider's whistleblowing policies if necessary. Accidents and incidents were carefully reviewed and there was evidence that lessons were learned as a result.

The staff we spoke with had all been at the service for a number of years and felt that they were part of the development of the service. One staff member said, "We are involved in everything, we have meetings and we discuss what we are going to do." We saw that staff meetings were carried out on a regular basis to provide staff with the opportunity to share ideas and information about the service.

The service had a registered manager in post, although they were not available during our inspection as they were unwell. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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. People and staff felt well supported by the registered manager. One person said, "[Registered manager's name] is the manager. She is really nice; she's normally here quite a lot." Staff also told us that the registered manager was usually available for support and we saw that there was an out-of-hours system so that staff could get support at any time. The registered manager was completing their statutory obligations, such as sending the CQC notifications when required.

There were quality assurance systems in place to help monitor the care being provided and identify areas for improvement or development. We saw that there were a number of checks and audits, such as care plans, infection control and medication, which were carried out on a regular basis. Areas for improvement were highlighted in these checks and an action plan was put in place to ensure they were dealt with.