

The Jubilee House Care Trust Limited

The Meadows Short Break Centre

Inspection report

19-21 Grove Meadow Welwyn Garden City Hertfordshire AL7 2BE

Tel: 01707373759

Website: www.jubileehouse.com

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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

The Meadows Short Break Centre offers short breaks for adults with learning disabilities and/or physical disabilities. These breaks can be for a few hours (tea visit) or an overnight stay; longer stays can also be accommodated (up to two weeks). Accommodation is in four single en-suite rooms. It is registered to provide accommodation and personal care for up to a maximum of four people. The service had a contract with about 44 people who regularly used the respite facility. There were four people at the service at the time of the inspection.

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." Registering the Right Support CQC policy

At the last inspection the service was rated Good. At this inspection we found the service remained Good.

The service had a registered manager. 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.

People's relatives told us that they were confident that people were safe when they stayed at The Meadows.

Risks to people's health and well-being were identified, planned for and managed. There were sufficient competent and experienced staff to provide people with appropriate support when they needed it.

People received care from staff who knew them well. Staff treated people with kindness, dignity and respect. Relatives were positive about the care and support provided.

Medicines were managed safely and people received their medicines in a way they could manage.

People were supported to have 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 supported to maintain good health and had access to health and social care professionals when necessary.

Relatives knew how to make a complaint and were sure they would be listened to and any concerns acted upon.

The registered manager, deputy a friends and families. There were cl safety of the service was reviewed	lose relations with social and h	velcoming atmosphere for people a nealthcare professionals and the qu	nd their Jality and

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	



The Meadows Short Break Centre

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.

This comprehensive inspection was carried out by one inspector on 20 November 2017 and was unannounced.

We did not send the provider a Provider Information Return (PIR) before this inspection. 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. We last requested a PIR in August 2015, which the provider had completed.

People who used the service were not able to share their views with us, however following this inspection we contacted three relatives by telephone to obtain their views on the service provided. We also contacted five health and social care professionals to receive their feedback.

During the course of the inspection we spoke with one relative, three care staff, the registered manager and the deputy manager. To help us understand the experiences of people who lived in the home we spent time in the communal lounge/ dining room and were able to observe interactions between people and staff members and the support offered. We reviewed two people's care records, two staff personnel files and records relating to the management of the service.



Is the service safe?

Our findings

Relatives told us they were confident their family members were safe at The Meadows. One relative said "I have no concerns when [my relative] is at the Meadows they are cared for so well and I always feel they are safe". We observed people looked relaxed and comfortable in the service.

Staff understood how to keep people in their care safe and how to report, when necessary, any concerns they may have. Staff knew about risks to people's health, and completed a range of assessments and measures were in place to reduce these risks. Assessments included risks when being outside of the service, from choking and from behaviour that challenges. For example we observed people whose behaviour could challenge others were given space and freedom to roam around the service whilst being supervised. Health and social care professionals were involved in assessing risks to people's health and provided guidance to staff.

There were regular checks of fire safety equipment and fire drills were completed, which included evacuations involving people who used the service. Staff explained the procedures they would follow in the event of a fire. Checks, such as electrical or health and safety assessments, were also completed to help maintain people's safety.

Staff told us there were always enough staff to meet people's needs and to enable people to go outside of the service if they chose. A relative said "There are always staff around and they have time for [relative]".

Staff were trained, and systems were in place to support people to take their medicines safely. People brought their medicines into the service when they arrived for respite and staff recorded and administered people's medicines. We saw these medicines were recorded and stored safely. One staff member said "We do take care with medicines as they come with them in a bag or in a box and there are always two staff who check what is brought in and what is required".

People lived in a clean and well-maintained environment. There were systems in place to help promote infection control. These included cleaning regimes, schedules and training for staff as well as hand washing and use of gloves and aprons when appropriate. There were regular audits of the cleanliness of the service and planned deep cleans of the bedrooms. One relative said "It is always clean and fresh when I visit and I go often and at different times".

The registered manager said that lessons were learnt and improvements made when things go wrong saying." We have minimal incidents in the service but any incident would be discussed at weekly registered managers meetings across the organisation" Incidents would be escalated to the board of management and the Chief executive officer to review the incident and action taken.



Is the service effective?

Our findings

People were supported by skilled and knowledgeable staff. One relative said "The staff are really good and know what they are doing it's a great relief for me". Staff said training was good and appropriate to the people they supported. One staff member said "We also get regular supervision and can talk to the managers at any time, it is a very supportive place to work". Staff said they worked as a team for the best outcome for the people who used the service. One staff member said "It is a good team we are definitely supported and help each other to make sure people get the best support".

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). People who used the service had their capacity to make decisions and consent to their care assessed appropriately under the MCA. DoLS applications had been made to the local authority and some were pending authorisation at this time.

Staff were able to explain how MCA is put into practise when they supported people. They gave examples of how they promoted people's choice and assume capacity. One staff member said "Someone may not be able to have the ability to manage their finances but they know what clothes they want to choose or what activity they would prefer". We observed staff seeking consent and promoting peoples independence throughout the inspection.

We observed how people were supported to choose what they wished for lunch. People's preferences and any dietary requirements were noted in their care plan. The deputy manager explained "We plan the shopping each week when we know who is coming in. For example if we need to buy gluten free foods or if someone is a diabetic also people have favourite meals and we buy accordingly".

People were supported to maintain good health and access relevant healthcare services where necessary. The registered manager and deputy gave examples of how they have worked together with social and healthcare professionals to promote people's health. Relatives confirmed staff would follow up on any health concerns and were good at making sure they had all the necessary information about someone's health before they began respite. All relatives said staff would contact them if they had any concerns and would contact a GP if necessary.

The Meadows had been designed to enable people to access areas easily. It has four ensuite bedrooms two bedrooms are on the ground floor there is no lift so wheelchair users or people with restricted mobility can only be accommodated on the ground floor. There was specialist equipment in place to support people such as hoists, rise and fall baths and height adjustable beds. The registered manager had completed an audit of the environment in October 2017 with timescales for any actions that required attention.



Is the service caring?

Our findings

Relatives said how kind and caring the staff were to their family members and to them. One relative said "There is always a welcoming atmosphere whenever I visit. Everyone is so caring and my relative loves going there". Another relative said how staff looked after them as much as their family member who used the service. One relative feedback from a survey saying "It is home from home".

We saw people were treated with kindness, care and dignity and had a relaxed and easy relationship with the staff members who clearly knew them well. We observed staff being patient and not rushing people. One relative spoke of how a staff member supported their family members in a sensitive way when they had a particular difficulty with their personal care and helped them gain confidence in doing the task more independently.

People were involved in their care and where they were unable to participate in the planning of their care, their relatives and health and social care professionals were involved in making best interest decisions appropriately on their behalf. People's preferences for their leisure and support needs was clearly recorded and staff spoke about how they enabled people take the lead in their care and support.

There was a notice board in the service which was full of bright colourful and accessible information and pictures to facilitate people's involvement. People were encouraged to keep in contact with friends and family. One relative said "My relative really looks forward to going and they ring to let me know how happy they are"

Confidentiality was maintained throughout the service and information held about people's health, support needs and medical histories was kept secure.



Is the service responsive?

Our findings

Relatives spoke of their confidence in the staffs' ability to relate and respond to their family member's health and social care needs. They were appreciative of the continuity of the staff team who could understand and related well to their relatives. One relative said "Staff really know [my family member] and how to understand them, it takes time but they are great".

People's care plans held information about their personal history, their likes and preferences and gave good guidance for staff. One relative said "They update my family member's care plan regularly and when anything changes. If there is a trip planned they contact me to see if my relative would like to go". The registered manager and deputy agreed that more use could be made of pictorial information to make peoples plan of care more accessible. It is an area they are developing further.

People were supported to participate in activities in and outside of the home which reflected their interests and preferences. One relative said "There is a lot of choice for people to relax but also to have time alone if they wish". We observed one person communicated with staff by taking them towards what they wanted.

People's relatives told us they felt able to feedback their views on the service and were encouraged to do so. There were monthly meetings for people who used the service in order to gain their views and idea for the service. For example at one meeting people spoke about the activities they enjoyed, how they liked the outings when transport was available and the type of food they would like to have.

Relatives told us they knew how to make a complaint though they had not an occasion to do so but they were confident any concern or complaint would be dealt with. One relative said "The managers and staff are really open and easy to talk with so I would have no problem raising any concern with them".



Is the service well-led?

Our findings

The service had a registered manager. 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.

The focus of the managers and staff was to promote the best outcomes for people. There were clear lines of responsibilities and staff showed they understood their responsibilities in respect of maintaining the quality and safety of the service. One staff member said "The managers are very 'hands on' and our team values are very person centred. It's a really good place to work".

There were staff meetings and monthly meetings for the people who used the service. Staff said they received good support and regular supervisions and could contribute their ideas about the running to the service.

As part of the providers wish to seek continual improvement they had requested an external survey of all of the services in May 2017 which involved feedback from people who used the service, their relatives, social and healthcare professionals and staff. Feedback from the survey was used to inform action plans where required.

There were effective quality assurance systems in place that monitored people's care. We saw that audits and checks were in place which monitored safety and the quality of care people received. These included health and safety, medicines, food hygiene, infection control and care plans.

The registered manager spoke of how they are looking at succession management of staff so as to maintain consistency for people who use the service. The registered manager spoke of being really proud of the staff who were flexible, and worked hard as a team for the people who use the service.

Providers of health and social care are required to inform the Care Quality Commission, (CQC), of certain events that happen in or affect the service. The registered manager had informed the CQC of significant events in a timely way which meant we could check that appropriate action had been taken.

The registered manager and deputy promoted a positive open and inclusive culture within the service. Relatives and staff spoke warmly about the support and good atmosphere with the registered manager and the deputy manager within the home .Relatives spoke of how flexible and responsive the staff were to their changing needs. One relative said "It's definitely well managed. It is an invaluable service and I do not know what I would do without it".