

Valeo Limited

Trabel

Inspection report

26-28 Cambridge Road
Huddersfield
West Yorkshire
HD1 5BU

Tel: 01484535180

Date of inspection visit:
05 December 2023
14 December 2023

Date of publication:
01 February 2024

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Trabel is a residential care home providing accommodation and personal care for up to 12 people. The service provides support to people with learning disabilities or autistic spectrum disorder. At the time of our inspection there were 12 people using the service.

People's experience of using this service and what we found

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

People received the care and support they needed to be safe. People had a choice about their living environment and were able to personalise their rooms. Staff communicated with people in a way that met their needs. People were supported with their medicines in a way that promoted their independence and achieved the best possible health outcome.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Staff supported people to access health and social care support in the community.

Right Care:

Staff understood how to protect people from poor care and abuse. Care was provided in line with people's preferences and choices. Staff had training on how to recognise and report abuse. People's care and support plans reflected their needs. Care records contained risk assessments with clear guidance for staff to follow. The service worked together with healthcare professionals to ensure people's needs could be met.

Right Culture:

The registered manager promoted a person-centred environment and people experienced good outcomes. People received compassionate and empowering care that was tailored to their needs. Staff understood people's needs. People and those important to them were involved in planning their care. Staff had completed relevant training required for their role.

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

Rating at last inspection

At the last inspection we rated this service as good (published on 1 November 2017).

At our last inspection we recommended that appropriate records were maintained in relation to the Mental Capacity Act. At this inspection we found the provider had acted on the recommendation and had made improvements.

Why we inspected

We inspected due to the length of time since the last inspection.

This report only covers our findings in relation to the Key Questions Safe, Effective and Well Led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained the same based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'All inspection reports and timeline' link for Trabel on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our inspection programme. If we receive any concerning information, we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service effective?</p> <p>The service was effective.</p> <p>Details are in our effective findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Trabel

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 2 inspectors, and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Trabel is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Trabel is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in

the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service, 2 relatives and 4 members of staff including the registered manager. We reviewed a range of records. This included 4 people's care records and multiple people's medicine records. We looked at 3 staff recruitment files and a variety of records relating to the management of the service. We observed people's care and support and carried out a visual inspection of the premises.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There was a clear safeguarding process and all incidents were reported to the appropriate bodies.
- Staff understood the signs of abuse and the importance of safeguarding. One staff member said, "Safeguarding is about keeping service users safe from any potential harm or risks."
- The provider ensured staff received training in safeguarding vulnerable adults.

Assessing risk, safety monitoring and management

- Where people had risks to their safety these were assessed, and plans put in place to minimise the risks.
- Care records provided staff with information on how to support people safely and effectively.
- People had emergency plans which outlined how to support them should they need to evacuate the building in an emergency.

Staffing and recruitment

- Staff had been safely recruited. The provider had carried out pre-employment checks, including DBS checks, to ensure staff were safe to work with people. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- We observed staffing levels throughout the day across different areas of the home. There were enough staff to support people safely.
- People and relatives spoke positively about the staff. One person said, "I really like the staff they are kind they talk to me."

Using medicines safely

- Medicines administrations systems were effective in ensuring people had their medicines as prescribed.
- Where people required their medicines 'as required', guidance was available for staff to ensure these were given in a consistent way.
- Staff who administered medicines had received training and their competencies were regularly assessed. This helped to assure the registered manager staff continued to have the skills required to administer people's medicines safely.

Preventing and controlling infection

- The home environment was clean, the home was working on actions to improve aspects of the home.

Visiting in care homes

- At the time of our inspection there were no restrictions on visiting.

Learning lessons when things go wrong

- Systems were in place to record accident and incidents.
- The registered manager reviewed accident and incident records to identify patterns or trends to mitigate future risks to people.
- Learning from incidents was considered. One staff member told us they would, "Try and find out what and how the incident happened so we can make any changes to prevent it from happening again."

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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

There was a recommendation about MCA and DoLS at the last inspection.

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 MCA 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.

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 appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Mental capacity assessments and best interest decisions had been undertaken, there was clear evidence that decisions had been made in the best interest of people for specific decisions.
- Staff understood the principles of consent. We observed staff asking for consent throughout the inspection.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People had their needs assessed and care plans put in place to guide staff on how to support them. People told us staff understood their needs and preferences.
- Assessments and care plans considered people's needs, preferences. One relative told us, "I don't have any concerns and all [my relatives] cultural needs are being met."
- People felt they received support in line with their preferences. One person told us, "I can have a drink or a biscuit if I want. If I am not well staff give me medication for a headache. I can get up and go to bed when I want."

Staff support: induction, training, skills and experience

- Staff received training relevant for their role. We observed staff had the skills required to provide personalised support.
- Staff also received regular updates to their training. One staff member said, "We have regular refresher training, this is yearly and we can also request for extra training if we need it."
- Staff received regular supervision and told us they felt supported by the management team.

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

- People were supported with their nutritional and hydration needs. Staff knew what people's preferences were and how to support people.
- Where people had specific dietary needs, staff were aware, and people received food and drink that was safe and met their needs.
- Staff understood how to support people to maintain a nutritious diet. One staff member told us, "We have to make sure we know each person's preferences and offer meals based on that."

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

- There were clear plans to support people to manage health conditions.
- We saw evidence of collaborative working with other professionals to help manage challenges people presented.
- People had access to health services and were supported to attend routine appointments.

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

- The home was adapted to meet the needs of people.
- People's rooms were personalised with personal pictures and items.
- There were communal areas within the service for people to enjoy.

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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Throughout our inspection, we observed caring and supportive interactions between people and staff.
- Staff were positive about the provider and enjoyed working at the service.
- Relatives and people were complementary about the staff team.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager was aware of their legal responsibilities under the duty of candour. They worked in collaboration with other health care professionals in supporting people.

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

- Systems and processes were in place to check the safety and quality of the service.
- Staff used their knowledge of people's individual needs and preferences when caring for them.
- Staff felt supported by the managers. One staff said, "I don't have to wait for a supervision, I can always go to the manager whenever I want."

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

- People, relatives and staff had opportunities to provide feedback which was used to review the quality of care provided within the home and identify areas for improvement. This included through surveys, meetings and reviews of care.
- Person centred reviews for the people living at the service had been completed and information was fed into the care plan and future planning.

Continuous learning and improving care; Working in partnership with others

- The provider had created a learning culture at the service which improved the care people received
- The registered manager and care staff worked in partnership with other healthcare professionals involved in people's care.
- The provider worked in partnership with other health and social care professionals.