

# Regional Home From Home Ltd

# Regional Home from Home

#### **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

Regional Home from Home provides a 24hr service in supported living accommodation to enable younger adults with learning disabilities or autistic spectrum disorder needs to continue living fulfilling lives in the community. When we inspected the service provided support to one person living in supported accommodation in Northampton, although the large property has capacity to accommodate more people requiring support.

A registered manager was in post. 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 benefitted from the availability of 24hr support from a staff team that was caring, friendly, and responsive. Their right to make day-to-day choices about how they preferred their support to be provided was respected and this was reflected in their agreed care plan. Staff were able to demonstrate that they understood what was required of them to provide people with the safe support they needed to remain living independently in the local community.

There was enough staff employed to meet people's assessed needs. A team of staff had been recruited in sufficient numbers in anticipation of being able to meet the needs of other people assessed as suitable for supporting living accommodation. People were protected from the risks associated with the recruitment of staff unsuited to the role by the provider's recruitment procedures. Risk assessments were in place to reduce and manage the risks to people's health and welfare.

People benefitted from a service that was appropriately managed so that they received their service in a timely and reliable way. They always had the support they needed throughout the day and night, seven days a week by staff that were on duty at the supported living accommodation address.

People's rights to privacy in their own home and to make choices about how they received their care and support were respected by staff. Decisions affecting their care and support were taken in their best interest. People had the guidance and support they needed to raise concerns or make a complaint. There were policies and procedures in place to ensure that any complaints were appropriately investigated and that timely action was taken to make improvements to the service when necessary.

#### 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 was safe

People benefitted from receiving support and care from staff that were mindful of their responsibilities to safeguard them from harm.

They were protected from unsafe support and care. Staff knew and acted upon risk assessments associated with providing the level of support that was needed for people.

People received support from competent staff that had been appropriately recruited and trained.

#### Is the service effective?

Good



The service was effective.

People were provided with the support they needed and this was regularly reviewed to ensure their needs continued to be met.

People received a reliable service. There were contingency arrangements were in place to ensure the continuity of the service when staff were sick or on holiday.

Staff demonstrated their understanding of how people's capacity to make decisions had to be taken into account and acted upon.

#### Is the service caring?

Good



The service was caring.

People benefitted from receiving support from staff that respected their individuality.

People's dignity was assured when they received support and their privacy was respected.

People received their service from staff that were conscientious, compassionate, and committed to providing good standards of care.

#### Is the service responsive?

The service was responsive.

People's care plans were person centred to reflect their individuality and mental health needs.

People's care needs had been assessed prior to an agreed service being provided. Their needs were regularly reviewed with them so that the agreed service continued to meet their needs and expectations.

People were assured that appropriate and timely action would be taken if they had to complain about the service.

#### Is the service well-led?

Good



The service was well-led.

People were supported by staff that had the day-to-day managerial support they needed to do their job.

People's quality of care was monitored by the systems in place and timely action was taken to make improvements when necessary.

People benefitted from receiving a service that was well organised on a daily basis as well as long term.



# Regional Home from Home

**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 announced inspection was carried out by an inspector and took place on 2 March 2017. The provider of the domiciliary care service was given 24hrs notice because the regulated activity of 'personal care' was provided to a person living in the community in their own home. We needed to be sure that someone would be in the service location office when we inspected.

Before our inspection, we reviewed information we held about the provider such as, for example, statutory notifications that they had sent us. A statutory notification is information about important events which the provider is required to send us by law. We also took into account other information the provider had sent us about their service.

During this inspection we visited the provider's office located in the supported living premises in Northampton. We looked at three records in relation to staff recruitment and training, as well as records related to the quality monitoring of the service and the day-to-day management of the service. We spoke with the person using the service, the registered manager, assistant manager, and two support workers. We looked at the care and support records for the person using the service.



#### Is the service safe?

## Our findings

People's needs were safely met. The registered manager ensured that staffing levels were consistently maintained to meet the needs of people being supported. Sufficient numbers of staff were employed to provide a service to more than one person in the future. There were contingency scheduling arrangements in place to take account of holiday leave as well as unexpected support staff absences due to sickness.

People were protected from unsafe care. A range of risks were assessed to minimise the likelihood of people from receiving unsafe care. People's support plans had been reviewed on a regular basis to ensure that pertinent risk assessments were updated regularly or as changes occurred to level of support needed. The support plan contained a comprehensive assessment of their needs, including details of any associated risks to their safety that their assessment had highlighted. The plan also provided staff with the guidance and information they needed to provide people with safe care.

People were protected from harm arising from poor practice or ill treatment. There were clear safeguarding policies and procedures in place for staff to follow in practice if they were concerned about people's safety.

Staff understood the roles of other appropriate authorities that also had a duty to respond to allegations of abuse and protect people. They understood the risk factors and what they needed to do to raise their concerns with the right person if they suspected or witnessed ill treatment or poor practice.

People were safeguarded by staff recruitment policies and procedures against the risk of being cared for by unsuitable staff. All staff had been checked for criminal convictions; references from previous employers were taken up. Recruitment procedures were satisfactorily completed before staff received induction training prior to taking up their duties.



## Is the service effective?

## Our findings

People received a service from staff that had been provided with the appropriate guidance and information they needed to do their job and work with people with a range of needs arising from learning disabilities. They received individualised care and support in their own home from staff that had acquired the experiential skills as well as the training they needed to care for the person.

Staff had a good understanding of people's holistic needs and the support they needed to enable people to live as independently as possible within a supported living setting. Support plans contained assessments of their capacity to make decisions for themselves and consent to their care. They were mindful of and acted upon people's daily routines and preferences when they provided them with support. People were encouraged to make decisions about how they preferred to receive the support they needed at home and when they went out into the community.

Newly recruited staff had received a thorough induction that prepared them for working with people with learning disabilities, including people with autism. Staff confirmed their induction provided them with the essential knowledge and practical guidance they needed before they took up their support duties. They had received training and the guidance they needed to support people that may lack capacity to make some decisions whilst being supported to live in their own home in the community. 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.

Staff also had access to the support, supervision, training and on-going professional development that they required to work effectively in their roles.



## Is the service caring?

## Our findings

People's dignity and right to privacy was protected by staff. Staff were mindful that they were working in people's home by invitation and they were respectful of that. Their personal care support was discreetly managed by staff so that they received their support in a dignified way.

People were supported to do things at their own pace and it was evident from meeting with them and listening to what they had to say that they took a pride in sustaining their independence and being able to live in the community. Staff were sensitive to and acted upon people's needs for assistance or reassurance. They were familiar with people's individual behaviours and what to be mindful of when supporting them to engage with the community. We saw that staff engaged with the person we met with in a kind and respectful manner.

People were encouraged and enabled to do as much as they could for themselves within the context of a supported living service. They lived as part of the local community and made use of local facilities with discrete and appropriate support from accompanying staff.

People's individuality was respected by staff. They knew what people liked and disliked when they were provided with a service. They used person's preferred name when conversing with them and their manner was respectful. Staff were familiar with and acted upon people's routines and preferences for the way they liked to have their support provided. Staff were able to discuss how they facilitated people's choices in all aspects of their day-to-day support, including their right to take risks.



## Is the service responsive?

## Our findings

People's abilities to do things for themselves had been appropriately assessed prior to moving to their supported living accommodation as a tenant in their own home. Their family history, interests and behaviours were taken into consideration when their support plan was agreed with them in their best interest.

People were encouraged and enabled to make informed choices about their support and how they preferred to spend their time during the day. There was comprehensive information in their support plan about what they were capable of doing for themselves and the on-going support they needed to be able to put this into practice. Staff were skilled at picking up on people's non-verbal cues so that they knew if they needed their attention.

People consistently received the level support they needed in accordance with their individual needs assessments, whether on a day-to-day basis or over a longer period as their dependency needs changed or fluctuated over time.

People were protected from social isolation because staff made an effort to engage with them throughout the day and facilitate activities that were meaningful and enjoyable. Staff also ensured that people were enabled to enjoy going out and participate in what was going on in the wider community.

The provider had an appropriate complaints procedure in place, with timescales to respond to concerns raised by significant others involved in the person's support. People understood that staff would listen to them and take appropriate action if they were worried or unhappy about the way they received their support. A staff member said, "This is (person's name) home and we (staff) need to be sure (person's name) isn't unhappy with anything we do. We (staff) have got to know (person's name) and how (person) reacts so we (staff) will know if things aren't quite as they should be and what needs to be done about it to keep (person's name) happy and safe."



#### Is the service well-led?

## Our findings

People were assured of receiving support in their own accommodation that was competently managed on a daily basis. The registered manager had the necessary knowledge and acquired experience to motivate the staff team to do a good job. Staff said there was always an 'open door' if they needed guidance from the registered manager or from any of the senior care staff in the team. Staff also confirmed that there was a positive culture that inspired teamwork; that the effort and contribution each staff member made towards providing people with the care they needed was recognised and valued by the registered manager. It was evident from talking with staff that this ethos underpinned the way the service was provided to people.

People benefited from receiving a service that was appropriately monitored for quality and that improvements were made when required. Staff had been provided with the information they needed about the 'whistleblowing' procedure if they needed to raise concerns with appropriate outside regulatory agencies, such as the Care Quality Commission (CQC).

People's support records were kept up-to-date and the formats for recording information and setting out guidance for staff were regularly reviewed by the registered manager. Support records accurately reflected the daily as well as long term support people received. Records relating to staff recruitment and training were also appropriately maintained. They were kept up-to-date and reflected the training and supervision staff had received. Staff had their work performance regularly appraised at regular intervals. Staff said that the registered manager was readily approachable for advice and guidance at all other times.

Records were securely stored at the service office within the supported living premises. Policies and procedures to guide staff in good practices were in place and had been routinely updated when required.