

Benton Care Services Limited

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Inspection report

4 Benton Terrace
Stanley
County Durham
DH9 0NT

Tel: 01207281788

Date of inspection visit:

19 November 2019

21 November 2019

26 November 2019

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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? | Outstanding ☆ |
| Is the service responsive? | Good ● |
| Is the service well-led? | Good ● |

Summary of findings

Overall summary

About the service

Benton Care Services is a residential care home providing personal and nursing care to 13 people at the time of the inspection. The service can support up to 13 people. Accommodation is provided in three adjoining terraced houses.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

The service was exceptionally caring. Professionals and relatives repeatedly described the staff as excellent, fabulous or brilliant. People were extremely well-cared for by staff who took pride in ensuring people were well-dressed and supported to enjoy good relationships. Relatives had significant levels of trust in the service. Staff were motivated to work together and provide people with the best care.

Suitable arrangements were in place to keep people safe. People's personal risks were well-managed and regular checks were carried out on the environment and the vehicles used by the service to make sure people were safe. The provider carried out pre-employment checks on staff. Medicines were administered in a safe manner. The registered manager and staff were open to learning lessons to improve the service.

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 this practice.

People chose the meals they would like to eat. Specific diets were catered for including when people went out on picnics.

Care plans were very detailed and included people's preferences and wishes. They were regularly reviewed. End-of-life plans were in place.

The service had a complaints procedure. Relatives told us they had never had to make a complaint or raise a concern. Not everyone could make a verbal complaint. Staff understood how people communicated and addressed their wishes if they expressed any dissatisfaction.

The registered manager and the staff worked in partnership with other professionals to meet people's needs. Staff felt well-supported by the registered manager.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The registered manager had checks in place to measure the quality of the service. The staff had good working relationships with other professionals to support people's care. People accessed community facilities.

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

Rating at last inspection

The last rating for this service was good (report published 6 June 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-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.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Benton Care Services Limited

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Benton Care Services is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this

report. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service and six relatives about their experience of the care provided. We carried out observations of the interactions between staff and people using the service. We spoke with eight members of staff including the registered manager, the deputy manager, senior care workers and care workers.

We reviewed a range of records. This included two people's care records and multiple medicines records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We contacted relatives by telephone to seek their views about the service. We spoke with three professionals who regularly visit the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The registered manager and the staff protected people from abuse. Staff had been trained in safeguarding people and were confident the registered manager would respond to any of their concerns.
- The telephone contact number for the local authority safeguarding team was on display in the home for staff to use should they have any concerns.

Assessing risk, safety monitoring and management

- People's personal risks were identified and monitored. Risk assessments were reviewed each month.
- Systems were in place to review the safety aspects of the home and regular checks were carried out on the vehicles run by the service. Staff were asked to provide details of their driving licences through the Driver and Vehicle Licensing Agency, so the deputy manager could check they were able to drive the vehicles.

Staffing and recruitment

- There were safe recruitment practices in place to check if staff were suitable to work in the service.
- Staff confirmed they had a regular rota in place. There were enough staff on duty to meet people's needs.

Using medicines safely

- People's medicines were administered in safe manner. Staff clearly understood how people's medicines were to be ordered, received, stored, administered and disposed. Specific arrangements were in place for one person whose prescribed medicine dosage was liable to vary.
- Arrangements were in place for the safe use of topical medicines. These are prescribed creams which are applied to the skin.

Preventing and controlling infection

- The home was immaculate. Staff carried out regular cleaning and they immediately cleaned any equipment after use.
- Gloves and aprons were available to staff to reduce the risk of cross infection.

Learning lessons when things go wrong

- The registered manager and staff were open to learning lessons to keep people safe. Accidents and incidents were regularly reviewed by the registered manager to look for any themes and to reduce the likelihood of similar incidents.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs had been assessed in detail, and their needs and preferences were well documented in line with good practice guidelines.

Staff support: induction, training, skills and experience

- Staff had the support required to competently carry out their duties.
- Each member of staff had received an induction to the service. They were required to complete and update their knowledge through training and supervision.
- The registered manager had questions available to use in staff supervision to check on staff member's knowledge.

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

- People were well-supported to maintain a healthy diet.
- Staff prepared meals for people who had additional dietary requirements in keeping with professional advice.
- The registered explained they purchased food already prepared for people at risk of choking to ensure they had enough choice and could have picnic food when they went out. People were offered choices at mealtimes. One person told us how staff cooked their favourite meals including a home baked corned beef pie.

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

- Staff had documented changes to people's behaviour and had asked other agencies to become involved and review people's care needs.
- The registered manager and the staff were aware of STOMP (STOMP stands for stopping over medication of people with a learning disability, autism or both with psychotropic medicines). They were working closely with the local GP surgery to slowly reduce one person's medicines at a time. This prevented a number of people possibly become distressed at any one point and to enable staff to pay particularly close attention to the one person's whose medicines had changed.
- Staff supported people to attend medical appointments and remained with people when they were admitted to hospital.

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

- People were very familiar with their environment and did not need the assistance of signage to promote

their independence.

- A stair lift had been installed. Staff supported people to use the lift in a safe manner.
- People's rooms were personalised. One professional described people's bedrooms as 'beautiful'.
- The registered manager was concerned that as people got older they would need additional space and had begun to look for alternative premises.

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 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. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service was working within the principles of the MCA. Care plans for people's mental capacity showed people's capacity had been assessed and their ability to make decisions about their care addressed. Where people lacked capacity to make certain decisions, we saw evidence of decisions being made in people's best interests.
- The registered manager ensured DoLS applications had been made to the relevant authorities.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- The strong ethos of caring was led by the registered manager who displayed care and empathy towards people and staff. One person told us, "Staff are lush". They and their relative described how staff had transformed their ability to communicate and walk which had resulted in them being discharged by their hospital consultant.
- People benefitted from a strong, stable staff group who placed people at the core of the service. Staff valued how the registered manager insisted the service must be run with people at its heart. One staff member told us, "The registered manager is absolutely fair, and people are the most important. I can work with that."
- Professionals, relatives and people who used the service repeatedly reported staff ensure people's well-being was at the optimum level. This included providing diverse opportunities to meet people's sensory needs. A relative spoke of the relief at finding the service to be 'absolutely excellent' which had taken enormous pressure off them.
- Staff were very kind. They had a range of personal skills and interests which they used to support people. One staff member had used sugar craft skills to decorate cakes and made up decorative sweet packets to raise funds to buy the best ice cream maker for people. One relative described the staff as, 'fantastic' and went onto say that they could not praise the staff highly enough.
- Professionals were effusive about the high standards of care provided by staff. They spoke about people always being happy and content and said it was in the 'excellent category' of homes they visited. There were many examples to show the positive impact on people due to staff treating them as individuals.
- People's diverse needs were respected and documented. Care records included detailed information about people's disability and actions which were required to promote equality. A relative said, "If every service cared the same there would be no worries."

Supporting people to express their views and be involved in making decisions about their care

- Staff knew and understood people's needs exceptionally well. Professionals valued highly the ability of the staff to observe the smallest of changes in the behaviour of people who were unable to verbally communicate. One professional said by staff listening to people through their behaviour the staff provided them with rich data, so they could provide the very best care for people.
- Staff listened to people and were able to hear and understand people's voices. They responded very quickly to people's needs. One person said 'draw' and staff provided them with drawing equipment, spending time with them to ensure they were able to grasp the pencil.
- One person attended the staff meeting to give their views about the care they had received. They helped

recruit staff and attended staff training which had boosted their self-esteem.

- Staff had developed significant levels of trust and confidence with families. Relatives were happy to discuss with the registered manager and staff any points on behalf of people. They had experienced very positive responses with staff making immediate changes to people's care.

Respecting and promoting people's privacy, dignity and independence

- There were many examples which demonstrated promoting people's dignity was a key feature of the service. One person who experienced communication difficulties had a very detailed care plan which described to staff when they would speak about particular issues and the precise words they would use. Staff were advised how to respond so their dignity was not compromised.
- Dignity was promoted through meals. The registered manager had purchased food to meet people's needs and ensured when they were out in the community they were able to eat with others. Suitable hot food such as fish and chips were taken out when people wanted to go to the seaside to promote inclusion.
- People were supported to be extremely well dressed in matching clothes with their hair done in the way they liked it. The registered manager and the staff took great pride in ensuring people were well-presented so they were confident to go out in the community. One person was very proud to show us photos about how they were supported to dress up for a very important family occasion.
- Promoting people's independence was very important to staff. One person told us staff helped them save money, so they could afford the things they wanted to buy. A relative highly valued being able to provide a list of gifts to a keyworker so they could support the person to choose family presents and be a part of family celebrations.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The staff had drawn up accurate and up-to-date care plans which showed staff understood people's personal needs. The care plans demonstrated people had choice and control.
- Staff reviewed the plans each month. The plans contained person-centred objectives and provided guidance to staff on how these should be achieved.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager explained to us they had systems in place to assist people's communication. They had tried to find useful systems but had found sitting with people to give them choices was often what worked best.
- Staff had written detailed communication plans in which they described how people liked to communicate and the words and gestures they would use.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff had put arrangements in place with family members to promote people's contact with their relatives both in the home and in the community. Relatives told us they felt welcomed into the service.
- People had access to activities which were important to them. Staff made arrangements with people to carry out their preferred activities. Books, puzzles and art equipment were available in the home. People told us they liked watching the TV soaps.
- The provider had different types of transport available to assist people access the community. People were able to go out supported by staff on their own or in small groups to places of their choice.

End-of-life care and support

- The registered manager had worked with people and their families to ensure everyone had a funeral plan in place. The plans included people's preferences for their end of life. Relatives confirmed they had been involved in these plans.

Improving care quality in response to complaints or concerns

- The provider had a complaints process in place. There had been no complaints since our last inspection.

Relatives confirmed they had not made a complaint and told us they had no need to do so. One relative said, "Never had a problem."

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The registered manager was a strong leader who empowered staff to provide a high standard of care to people. Staff and relatives told us the registered manager was approachable. One member of staff described the registered manager as having a 'revolving door' where staff sought the registered manager's views and advice on a variety of topics.
- The registered manager genuinely sought the opinions of staff through staff and supervision meetings.
- The culture of the service was open and there was a strong desire to achieve the very best outcomes for people. The registered manager and the staff gathered useful information about people's behaviour and included other professionals in their discussions at the earliest opportunity.

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 understood the duty of candour. They were open and honest with professionals.

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

- The registered manager and the staff were clear about their roles. Systems were in place to monitor the quality of the service and actions were taken to make improvements. The registered manager had delegated auditing to staff members and carried out checks to make sure audits had been completed.
- Documentation was clear and easily accessible to show how the service met their registration requirements.
- Due to the location of the home, plans were in place to stockpile foodstuffs should the service be cut off in the event of heavy snowfall.

Continuous learning and improving care; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager and staff were open to looking at ways of improving care. They had adjusted the service on the advice of other professionals.
- Relatives felt they were engaged in the service and could make any suggestions. Everyone felt welcomed and their suggestions had been acted upon.
- Staff were aware of people's equality characteristics and promoted their involvement in the service through different means.

Working in partnership with others

- Professionals valued how the staff worked in partnership with them.
- Records showed staff worked with a range of professionals to support people's health and well-being.