

Voyage 1 Limited

Talbot Court

Inspection report

1-3 Jervoise Street
Carters Green
West Bromwich
West Midlands
B70 9LZ

Tel: 01215253508
Website: www.voyagecare.com

Date of inspection visit:
01 April 2019
04 April 2019

Date of publication:
16 May 2019

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

About the service: Talbot Court is a nursing care home that was providing personal care to 8 people who may have a sensory impairment and/or a learning disability and/or autism at the time of the inspection.

People's experience of using this service:

People were supported by staff that were caring, compassionate and treated with dignity and respect. Any concerns or worries were listened and responded to and used as opportunities to improve.

The care people received was person centred care and based on their individual needs and preferences. Staff were aware of people's life histories and individual preferences. They used this information to develop positive, meaningful relationships with people. We found one individual who had a change in circumstances did not have update to date risk assessments.

People and their relatives told us they felt well cared for by staff. In addition, people told us staff treated them with respect and dignity and encouraged them to maintain relationships and promote their independence.

The provider ensured people had consistency with staff members, as a result people and staff were able to build positive relationships. People were supported by staff who had the skills and knowledge to meet their needs. Staff understood and felt confident in their role.

Staff liaised with other health care professionals to ensure people's safety and meet their health needs.

Where people lacked capacity, staff worked with the local authority to make sure they minimised any restrictions on people's freedom for their safety and wellbeing.

Staff spoke positively about working for the provider. They felt well supported and that they could talk to management at any time, feeling confident any concerns would be acted on promptly. They felt valued and happy in their role.

Audits were completed by staff and the registered manager to check the quality and safety of the service. Action was taken to address any issues identified following audit reports.

The registered manager and operations manager worked well to lead the staff team in their roles and ensure people received a good service.

More information is in Detailed Findings below

Rating at last inspection: Good. (Report Published 03 July 2017)

Why we inspected: This inspection was conducted due to concerns we received in relation to alleged neglect of one individual who was currently living at the service. Following our inspection the service remained at an overall rating of good.

Enforcement:

No enforcement action was required.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 caring.

Details are in our caring findings below.

Good ●

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 ●

Talbot Court

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: The inspection team consisted of one inspector.

Service and service type: Talbot Court is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this 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.

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:

The inspection was unannounced. We visited the location on the 01 April 2019 and 04 April 2019.

What we did: We reviewed information we had received about the service since they were registered with us. This included details about incidents the provider must notify us about, such as allegations of abuse and we sought feedback from the local authority and other professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection we reviewed two staff recruitment and supervision files, five care records and records relating to health and safety, safeguarding, accidents and incidents and quality assurance, and other aspects of the service.

We spoke with five people living at the service and two relatives. As some people were unable to share their views with us, we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care for people who are unable to speak with us.

We spoke with three care staff, nurse, student nurse, support worker, team leader, deputy, operations manager and the registered manager. We also received positive feedback from 3 health and social care professionals about their experience of the service.

Is the service safe?

Our findings

Safe- this means that people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- The majority of people had personalised risk assessments, which included measures to reduce risks as much as possible. Each person's care record included risk assessments considering risks associated with the person's environment, their care and treatment, medicines and any other factors. The majority of risk assessments were detailed and included actions for staff to take to keep people safe and reduce the risks of harm, for example care plans included effective ways to minimise risk of falls for one person, and keep another person's skin healthy.

Staff understood where people required support to reduce the risk of avoidable harm. We found one person's risk assessments were not up to date based on the person's changing needs. For example, if the individual declined care or only wanted support from one carer, the incident had been recorded but there were no recorded instruction for staff to follow. In addition, there were no instructions for staff to follow to meet the person's changing eating requirements. The registered manager and operations manager addressed this issue. One day two of the inspection we found comprehensive updated risk assessments for the individual addressing the issues we had raised. In addition, staff were very knowledgeable about how to administer care to keep the individual safe, as a result the impact on the individual was minimal.

- The environment and equipment was well maintained and had been assessed for safety.
- Where people experienced periods of distress or anxiety staff knew how to respond effectively. One staff member said, "[Name] is having a distressful episode we leave them and come back later. We will also talk to them about their hobbies or say let's watch a movie, these methods sometimes will calm them down".
- The registered manager checked all accident and incident records to make sure any action was effective and used any incidents as a learning opportunity.

Safeguarding systems and processes

- People were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.
- The provider had effective safeguarding systems in place and all staff had a good understanding of what to do to make sure people were protected from harm or abuse.
- People and their relatives explained to us how the staff maintained their safety. One relative said, "[name] is completely safe there, I've no concerns". One person said, "Yes I feel safe".

Staffing levels

- There were sufficient numbers of staff to meet people's needs. The provider ensured people had a consistent staff team.
- Each person's staffing needs were calculated based on individual needs assessments, which were reviewed and updated regularly as people's individual needs changed.

- People and their relatives told us they received care in a timely and person-centred way.
- Staff had been recruited safely. All pre-employment checks had been carried out including reference checks from previous employers.

Using medicines safely

- Medicines were managed safely to ensure people received them safely and in accordance with their health needs and the prescriber's instructions. Staff were trained in medicines management and regular competency checks were carried to ensure safe practice.
- People and their relatives told us they were happy with the support people received to take their medicines. Each person's prescribed medicines were reviewed by their GP regularly. Some people had been prescribed medicine to be used as required (PRN). We found clear protocols for staff to follow before administering these.
- People's medicines were safely received, stored and administered. Medicines were audited regularly with action taken to follow up any areas for improvement, for example a missing signature was identified and the matter raised the staff member.

Preventing and controlling infection

- Staff followed good infection control practices and used personal protective equipment (PPE) to help prevent the spread of healthcare related infections. The service was clean and odour free
- Relatives told us staff practiced good infection control measures, one relative told us, "It's always been very clean when I visited, no issues whatsoever".

Learning lessons when things go wrong

- Accidents and incidents were reported and monitored by the registered manager to identify any trends. The registered manager discussed accidents/incidents with staff as a learning opportunity. For example, if an individual had a fall what could be done to minimise the risk of it occurring again and had there been any change in the person's overall health condition.

Is the service effective?

Our findings

Effective- this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

People's outcomes were consistently good, and people's feedback confirmed this.

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

- Improvements had been made to the outside of the building. Following a quarterly audit, it was identified that the entrance to the building could be improved for better wheelchair access. A wider front door and ramp have been installed. The registered manager said, "We want people and visitors to feel comfortable here, we identified that the front entrance could be widened for easier access for our people and visitors. We are always looking at ways to improve the service".
- The service enabled people to remain as independent as possible by ensuring they had the equipment they needed. Equipment utilised by the service included a toilet frame and a shower chair and non-slip bathroom flooring, this helped people access the bathroom more easily and safely. The premises provided people with choices about where they spent their time.

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

- People's needs were assessed before the service began to provide support and people and their relatives confirmed this.
- Care was planned, reviewed and delivered in line with people's individual assessments.
- Assessments of people's needs were comprehensive, expected outcomes were identified and their individual care and support needs were regularly reviewed.
- Staff applied their learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life. One relative told us, "[Name] has an issue with their weight, the staff are great at encouraging them to pick healthier options and to do more exercise".

Staff skills, knowledge and experience

- People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs. The provider had a good system to monitor all staff and had regular and refresher training to keep them up to date with best practice. Training methods included online, face to face and competency assessments.
- Staff felt well supported and had regular supervision and an annual appraisal to discuss their further development. One staff member said, "I have regular supervision however I could approach management at any time to discuss a matter".
- New staff had completed a comprehensive induction. A student nurse said, "When I started the manager went through the procedures and policies with me. I received training and shadowing. I felt very prepared when I started performing tasks on my own. When I'm having my practice observed the manager makes you feel comfortable and provides very good feedback".

Supporting people to eat and drink enough with choice in a balanced diet

- People were supported by staff to maintain good nutrition and hydration. Staff encouraged people to eat a well-balanced diet and make healthy eating choices. One staff member said, "We encourage people to have healthier options, we discuss with them and their relatives what they would like to eat and drink. We ensure they are involved and that they have choices".

Supporting people to live healthier lives, access healthcare services and support

- Staff monitored people's health care needs and would inform relatives, senior staff members and healthcare professionals if there was any change in people's health needs. One person said, "If [name's] health condition changes they will inform the GP and keep me updated, they are very good at that".
- People visited their local surgery to see their GP and attended other health appointments regularly. A 'hospital passport' provided key information about each person, their communication and health needs, in the event they needed a stay in hospital.
- People were supported to improve their health. Staff encouraged people to take regular exercise to increase their fitness levels.

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 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. The application procedures for this in care homes and hospitals are 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 were being met.
- The registered manager had undertaken training in meeting the requirements of MCA and DoLS. Where people lacked capacity, mental capacity assessments had been completed. Relatives, advocates and other health and social care professionals were consulted and involved in making best interest decisions, as appropriate. For example, about if it was in a person's best interest to have a health screening test.
- Where people were deprived of their liberty, the registered manager worked with the local authority to seek authorisation for this to ensure this was lawful. DoLS applications had been undertaken and submitted for all service users. This was because people were not free to leave the service unsupervised because they would not be able to keep themselves safe. Staff acted in accordance with DoLS authorisations.
- Where people did not have capacity to make decisions, they were supported to have, as much as possible, choice and control of their lives and staff supported them in the least restrictive way possible.
- People were asked for their consent before they received any care and treatment. For example, before assisting people with personal care and getting dressed. Staff involved people in decisions about their care and acted in accordance with their wishes.

Is the service caring?

Our findings

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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People received care from staff who developed positive, caring and compassionate relationships with them. One relative said, "When caring for [name] the staff knew him so well. [name] could not communicate verbally. The staff would tell me things that I didn't know such as that he likes certain types of music and when he likes to have a sleep. It was evident they took the time to get to know him".
- People told us staff knew their preferences and cared for them in the way they liked. Staff we spoke to knew people's life histories and individual preferences. One staff member said, "For people with communication needs, we try and get as much information from family members. We will also use picture cards with the individual, as you get to know them you can tell from their facial expressions and touch what they are thinking."
- Staff were kind and affectionate towards people and knew what mattered to them. People were treated with kindness and were positive about the staff caring attitude. People and their relatives were positive about the care they received. People and relative comments included, "They staff are very caring towards people", "The manager is lovely, and you can tell she cares about the people", "Staff are very genuine", "Staff are kind and approachable".

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

- People were involved in day to day decisions and in regular reviews of their care. Relatives confirmed staff involved them when people need help and support with decision making.
- People and relatives told us they felt listened to, one relative said, "I can raise any issue, they always listen to us". Another relative said, "When I arrive all the staff are so friendly, asking how I'm doing and getting me a cup of tea. They will then sit with me and listen to what I have to say, they always follow through on what we have agreed".
- Staff supported people to communicate their views in line with their needs. For example, an individual with communication needs had a detailed communication page in their care plan for staff to follow. The page detailed that if the individual was humming loudly they were happy and if the individual bit her hand they were unhappy. Staff members used this approach to ensure they person was involved in decision making regarding participating in activities and the care being administered.

Respecting and promoting people's privacy, dignity and independence

- Staff showed genuine concern for people and ensured people's rights were upheld.
- Staff and the registered manager told us how they ensured people received the support they needed whilst maintaining their dignity and privacy. For example, if an individual was having a challenging episode or dealing with anxiety, they would try to maintain the person's dignity by shutting doors and keeping other people away while the person was receiving support.

- People's confidentiality was respected and people's care records were kept securely.
- People were encouraged to do as much for themselves as possible. People's care plans showed what aspects of personal care people could manage independently and which they needed staff support with. For example, one person needed encouragement to clean their teeth. A relative said, "They encourage [name] to clean their teeth because they know they can do it"
- People were supported to maintain and develop relationships with those close to them, and be part of their local community. One person told us they liked being taken to the cinema and going to the park.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

People's needs were met through good organisation and delivery.

Personalised care

- Care plans were personalised to the individual and recorded details about each person's specific needs and how they liked to be supported.
- People were empowered to have as much control and independence as possible, including in developing care, support plans.
- Staff were knowledgeable about people and their needs.
- Daily notes were completed which gave an overview of the care people had received and captured any changes in people's health and well-being.
- There was information in place to enable the provider to meet the requirements of the Accessible Information Standard (AIS). This is a legal requirement to ensure people with a disability or sensory loss can access and understand information they are given. Care plans were available in different formats such as large print and different languages.
- One person said, "I like it here, the staff are good", a relative said, "Yes the care is personalised, [name] gets the care to meet their needs". A staff member said, "The care has to be personalised so that it meets people's needs. It can be anything big or small, for example [name] likes to tear paper, it really settles them. We ensure she has paper to feel and tear". We witnessed during the inspection the individual with paper and observed them to be happy and relaxed. Another person enjoyed a particular comedy show, staff ensured the individual had access to watch the programme.
- People's rooms were personalised with things that were meaningful to them such as family photographs, favourite soft toys and artwork. One individual had a favourite set of play toys, there were clear instructions in the person's care plan not to move the toys because the person would find this distressing. We witnessed staff following this instruction when interacting with the person and administering care. Another person found it distressing if their bedroom lights were turned on and if people knocked on their door. There were clear instructions on the front of the person door not to knock the door and not to turn the lights on. It instructed people how to make their presence known to the individual by softly touching the person's hand.
- People were supported to pursue their interests and hobbies such as shopping, cinema and bowling however people and their relatives wanted more activities to be arranged outside of the home.

Improving care quality in response to complaints or concerns

- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this. One relative said, "They always ask if everything is ok and we have paperwork we can complete if we want to make a suggestion".
- People and their families knew how to make complaints; and felt confident that these would be listened to and acted upon in an open manner.
- People said staff listened to them and resolved any day to day concerns. The provider had a complaints policy and procedure and people received written information about how to raise a complaint.

- No formal complaints had been received since the last inspection. The registered manager said, "I always speak to people and relatives about how things are going, I think it's good to solve any issues straight away, this ensures they don't escalate".

End of life care and support

- The registered manager informed us no one was receiving end of life care at the time of our inspection. We saw care plans contained some information in relation to people's individual wishes regarding their end of life care.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed and well led. Leaders and the culture they created promoted high quality, person centred care.

Planning and promoting person-centred, high-quality care and support, and understands and acts on duty of candour responsibility.

- People, relatives and staff expressed confidence in the management team. Staff were encouraged to raise any concerns in confidence through a whistleblowing policy. One relative told us, "The manager is very good, they speak to people at their level". One staff member told us, "We are encouraged to speak up and voice our concerns".
- Each person had a keyworker, who was a key point of contact for people and relatives. At daily handover and staff meetings staff discussed how best to support individuals, reviewed any incidents, accidents or safeguarding concerns.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements.

- The registered manager and staff understood their roles and responsibilities.
 - People spoke highly of the service.
 - Staff also strived to ensure care was delivered in the way people needed and wanted it.
 - There was a good communication maintained between the registered manager, operations manager and staff.
 - Staff felt respected, valued and supported and that they were fairly treated.
 - The management team carried out audits to monitor the quality of the service.
 - Policies and procedures were reviewed and updated.
 - A training matrix monitored that staff were up to date with training and planned future training needs.
- Improvements to environment were made in response to audit findings. The registered manager regularly with the operations manager to implement and monitor the changes and improvements.

Engaging and involving people using the service, the public and staff.

- People, relatives and advocates feedback was sought through a survey. Responses showed they were happy with the standard of care.
- There was an open culture where staff were encouraged to make suggestions about how improvements could be made to the quality of care and support offered to people.
- Staff reported positively about working for the service and did not identify any areas for improvement.
- People and staff were encouraged to air their views and concerns. The registered manager told us although they had not had any concerns they would ensure if they did these would be listened to and acted on to help improve and shape the service and culture.

- Staff were consulted and involved in decision making and regular staff meetings were held.
- A staff survey showed staff reported positively about working for the service and did not identify any areas for improvement. A staff member said, "It's a very caring atmosphere here, we try and work as one big family".
- People spoke highly of the registered manager and commented communication was good with all management. One relative said, "The [registered manager] is fantastic, you can tell they care about people, they are always smiling and approachable". Another relative said, "I can't speak more highly of the manager, they have been wonderful caring for [name]. The manager has been so supportive to us as a family, they genuinely care about helping people".

Continuous learning and improving care.

- Staff meetings took place regularly. One staff member told us, "We have regular meetings, we given an opportunity to raise any concerns".
- The management team completed regular in-house audits of all aspects of the service.