

Tudor Views Limited

Hamilton Court

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 

Overall summary

This was an unannounced inspection. At the last inspection carried out on 12 and 13 March 2015 we found that the provider was not meeting the regulation in relation to not having effective arrangements in place to ask and act on people's consent and not ensuring that action had been taken to seek authorisation where restrictions were in place. After the inspection the provider sent us an action plan setting out the improvements that they would make. At this inspection we found that the provider had made the required improvements.

Hamilton Court is a care home which is registered to provide care to up to 13 people. The home specialises in the care of people with a learning disability and mental health support needs. On the day of our inspection there were 12 people living at Hamilton Court.

There was a registered manager in post. 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.

Summary of findings

People were protected from risk because measures were in place to ensure risks to people were managed. Staff understood the different types of abuse and knew what action they would take if they thought a person was at risk of harm.

Staff were aware of the signs that would indicate that a person was unhappy, so that they could take appropriate actions. Staff were able to describe what constitutes abuse and the reporting procedures they would follow.

People were supported by adequate numbers of staff on duty.

People were supported to receive their medication as prescribed. Medicines were safely managed. Staff who administered medicines had received training in this.

Staff received the training and support they needed to carry out their role effectively. Training included some specific training relevant for the needs of the people who lived at the home.

Staff were kind and compassionate in the way they supported people. People were supported to pursue interest and hobbies that were of interest to them.

Staff sought people's consent before providing care and support. Staff understood the circumstances when the legal requirements of the Mental Capacity Act (2005) and the Deprivation of Liberty Safeguards (DoLS) were to be followed.

People had access to food and drinks and were supported to have food that they enjoyed.

People were supported to stay healthy. Opportunities were provided to support people to see health professionals and to attend health related appointments.

People told us that improvement had been made since our last inspection. Our findings at the inspection supported this view. Systems to monitor the quality of the service had been embedded and were effective.

Summary of findings

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.

People were protected from abuse and avoidable harm because the provider had effective systems in place.

Risks to people were assessed. Staff understood how to keep people safe.

There were enough staff to support people safely.

Appropriate systems were in place for the management and administration of medicines, so people received them safely.

Good



Is the service effective?

The service was effective.

Staff received the training and support needed to meet people's needs.

People's consent was sought before they were provided with care. Staff understood their responsibilities to protect people's rights so that they were not subject to unnecessary restrictions.

Good



Is the service caring?

The service was caring.

Staff knew people and what was important in their lives.

People were treated with kindness and respect.

People were supported to maintain relationship's with their families.

Good



Is the service responsive?

The service was responsive.

Care was delivered in a way that met people's individual needs and preferences.

People were supported to take part in activities that they enjoyed and were important to them.

People felt able to raise concerns with staff if they needed to.

Good



Is the service well-led?

The service was well led.

A registered manager was employed at the service.

Previous breaches in the regulations had been met.

There were systems in place to monitor the quality of the service and to strive to improve the service and build on developments already made.

People benefitted from an open and inclusive atmosphere in the home.

Good



Hamilton Court

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 inspection took place on 13 October 2015 and was unannounced. The inspection team comprised of one inspector.

We looked at the information we held about the service and provider. This included the notifications that the provider had sent to us about incidents at the service and information we had received from the public. Notifications are information the provider has to send us by law.

During our inspection we met with all of the people that lived at Hamilton Court. People living at the home have a learning disability and additional complex's needs. Some people had limited verbal communication and were not able to tell us if they liked living at the home. We observed how staff supported people throughout the inspection to help us understand their experience of living at the home.

We spoke with the manager, four care staff, and two relatives. We looked at the care records of two people, the medicine management processes and at records maintained by the home about recruitment, staffing, training and the quality of the service.

Is the service safe?

Our findings

People told us they felt safe. One person told us, “Yes I do feel safe living here”. One person said, “Happy”. Another person smiled and raised their thumb when we asked them about their home. We saw throughout our inspection that people looked comfortable and relaxed with staff. Staff reassured people when they needed to and reduced people’s anxiety.

Staff on duty told us that they had received training in protecting people from abuse and they were knowledgeable about the types of potential abuse. Staff that we spoke with told us that they would recognise the changes in people’s behaviour or mood that could indicate that people may be being harmed or unhappy. Staff described the action they would take in response to abuse being reported or suspected. They recognised their responsibility in ensuring the safe running of the home. The provider had procedures in place so that staff had the information they needed to be able to respond and report concerns about people’s safety. The information we hold about the service showed that the provider had reported incidents of suspected abuse appropriately.

Staff spoken with were knowledgeable about the risk to people from activities of daily living. Care records we looked at showed that the risk to people had been assessed and plans were in place to manage this risk. A staff member told us, “We know the people very well and I know the different risk and I am confident supporting the people who live here”. We saw that people were supported in accordance with their risk management plans. For example when going out on activities in the local community the appropriate staff support was provided.

Aids and adaptations were in place to ensure people’s safety. For example for people with hearing loss, equipment was in place to ensure they would be alerted when the fire alarm activated. Staff told us that they knew what to do if there was a medical emergency in the home and how to summon help if needed.

On the day of our inspection we saw that people did not have to wait for support from staff and there was enough staff to enable people to do things that they liked. A person told us, “There always seems to be enough staff around”. Staff told us that adequate numbers of staff were available to support people. We asked the registered manager how they ensured that there was enough staff on duty. They explained how they managed the rota and how some care hours were also managed flexibly to ensure individual appointments or activities could be responded to. They told us that there was a full staff compliment employed and to ensure consistency any unplanned staff shortages were covered by permanent staff and no agency staff worked in the home.

The manager told us that she had audited all staff recruitment files as some staff had transferred from other homes within the service. Where information was missing or incomplete action had been taken to ensure that any gaps in information were dealt with to ensure that all the staff working at the home were suitable to work in social care.

People told us that they received their medicines on time. We saw that people had easy read information available to them about their medicines this helped to provide people with a clearer understanding about the medicines they were taking and why.

We observed staff supporting people to take their medicines and this was done safely. We looked at the systems in place for managing medicines in the home and found that there were appropriate arrangements for the safe handling of medicines. We saw that people’s medication was stored safely. Only nominated staff gave medicines, although all staff were trained in this. A staff member had a lead role in ensuring medicine management was well managed. We saw that checks on staff’s competency to give medicines safely were carried out by the manager periodically to ensure their practice remained safe.

Is the service effective?

Our findings

At our last inspection of this service in March 2015 we found the provider was breaching the regulations. They had not ensured that arrangements were in place to ask and act on people's consent in line with The Mental Capacity Act (MCA). MCA is important legislation that sets out the requirements that ensure that where people are unable to make significant and day to day decisions that these are made in their best interest. Also we saw some practice and restrictions in place that had not been recognised by the provider as a restriction. Action had not been taken to seek authorisation of these restrictions from the local authority, in line with Deprivation of Liberty Safeguards (DoLS). DoLS are in place so that any restrictions in place are lawful and people's rights are upheld. After the inspection we were sent an action plan from the provider setting out the improvements that they would make. We found during this inspection that the provider had taken the action needed to meet this regulation.

We saw that people that lived at the home may not have the mental capacity to make an informed choice about some decisions in their lives. Throughout the inspection we saw staff cared for people in a way that involved them in making some choices and decisions about their care. For example, what they wanted to do, where they wanted to go and what they wanted to eat and drink. Staff showed a regard for people's human and legal rights. Where people lacked the mental capacity to consent to bigger decisions about their care or treatment the provider had arrangements in place to ensure that decisions were made in the person's best interest.

Staff told us that they had received training in the MCA and DoLS and demonstrated adequate knowledge. We saw that the registered manager had made applications where needed for people using the service to the local authority to authorise the restrictions placed upon them.

All of the staff we spoke with said that they had received the training they needed to be able to do their job. We observed that staff had the skills that they needed to meet people's needs. A relative told us, "I think the staff are definitely well trained. They have been brilliant with [Person's name]. They have really improved since they have lived at Hamilton Road." Staff told us that they felt they received the support from the manager to carry out their role. Staff told us they had staff meetings and supervision sessions to discuss their work practice.

During our visit we saw people were supported to help prepare food and make drinks and snacks. Since our last inspection a kitchen area for the use of the people living in the home had been developed. People told us they could make drinks and snacks when they wanted to.

People told us the food was good. One person told us, "Its lovely very tasty". A relative told us that they enjoyed visiting their family member and also enjoyed having a meal with them. We saw that People had been asked their views about menu planning and had recently completed a survey in relation to food and menu planning so they could to share their views. One person told us that they had asked for more roast dinners. People told us and we saw during our visit that their cultural needs and preferences were met.

People told us that they were supported to see a range of health professionals. For example dentist, opticians and GP. One person told us, "If I am not well then I go to the doctors". We saw that the outcome of health appointments were recorded in detail so that any actions requested by healthcare professionals could be followed. Staff told us and records confirmed that medical advice was sought when staff had identified changes in people's wellbeing.

Is the service caring?

Our findings

We spent time in the communal areas of the home and observed that the interactions between people using the service and staff showed that they had a good relationship. Conversations were warm, caring, respectful and inclusive. We saw that staff frequently engaged with people and included people in the conversations.

Throughout our inspection we observed staff working consistently in a respectful way. We saw that staff knew people well and knew when people were becoming anxious.

People had their own bedroom so that they could spend time in private if they choose to. We saw that staff spoke to people respectfully and personal care was delivered in private. A person told us, "The staff always knock on my door. They are very good like that". When we spoke with staff individually about people's care they spoke with respect about the people they were supporting.

Staff told us that they were encouraging people to be more involved in the day to day running of the home and to develop their self-help skills. They told us that some people had become more involved with this than others. We saw that people were encouraged and supported by staff to help with household cleaning tasks, make drinks, take their clothes that had been washed to their bedroom, return plates after meal time to the kitchen, and go shopping for food items and personal toiletries.

People used a range of different methods to communicate and this has been recorded in the person's care plan to ensure that all staff had access to this information. Information was also available to people in different formats so they could make choices and decisions about their care. An activity box had been introduced with different activities in a picture format so people could make choices about what they wanted to do. Some people used sign language and gestures and we saw staff using signs and gestures to communicate effectively with people.

Is the service responsive?

Our findings

A person told us, “The staff listen to me and ask me about my care”. Another person told us, “Things have really improved at the home. The best I have ever known it. There are activities going on every day and things to do. The home is looking a lot nicer now”.

Staff that we spoke with knew people’s needs well. Staff were able to tell us people’s likes, preferences and important people in their life. People had all been assigned a key worker. A key worker is a member of staff that works with and in agreement with the person they are assigned to. The key worker has a responsibility to ensure that the person they work with has maximum control over aspects of their life. We saw that key worker had started to have meetings with people to talk through their care records and ask people for their comments.

The written care records we looked at had detail about the person and how they liked their needs to be met. We saw that the records had been updated when people’s needs changed to ensure they were reflective of their current needs

We saw during our visit that people were supported to do things that they enjoyed. On the day of our inspection some people went to a local park to play football and some people went out shopping. One person told us that they didn’t want to go out and that they spent their time in a way that they choose to. They told us that this was respected by staff. Another person told us that they preferred to spend their time mainly in their own room or doing what they chose to do. In the afternoon we saw that some people were involved in a baking session which they said they enjoyed. People told us, and records showed that they were supported to access local leisure and recreational facilities including the gym, cinema and day trips. People were also supported to attend clubs specific to their own needs and interest.

We saw that people were supported to celebrate birthdays and important events. On the day of our inspection one of the people was celebrating their birthday. They had been asked how they wanted to spend their day. Staff had made arrangements so their request to play snooker could be followed through. Other people in the home were involved in making cakes and joining in the birthday celebrations which people enjoyed.

Two people told us that resident meeting took place and that they had attended these and they were asked about activities that they would like to do, their views about the food and if they had any concerns. One person told us that people had requested a trip to a theme park and they told us the trip was planned and had taken place in July 2015.

People were supported to stay in touch with their family and people that were important to them. People living at the home were also supported to make visits to their family member’s home. A relative told us that the manager and staff were very good and they were always made to feel very welcome when they visited the home.

People told us if they needed to they would speak to the staff if they were not happy about something. A person told us, “I would go straight to [manager’s name] they listen and will sort things out”. We saw that an easy read version of the complaints procedure was accessible to people. We saw that people had been supported by staff to raise their concerns about things they were not happy about and these were recorded. The records described the issue and the action taken to resolve the matter and showed that people had received feedback.

Staff told us that they were confident that if there were any complaints, the manager would respond to them appropriately. We saw that the complaints procedure was visible in the home so visitors would know how to raise their concerns. In the event of any complaints being raised, there was a system in place to identify, capture and investigate complaints.

Is the service well-led?

Our findings

At our last inspection carried out on 12 and 13 March 2015 we found that the provider was not meeting the regulations in relation to; not having effective arrangements in place to ask and act on people's consent and not ensuring that action had been taken to seek authorisation where restrictions were in place. After the inspection the provider sent us an action plan setting out the improvements that they would make. At this inspection we found that the provider had made many improvements to the service including ensuring that action was taken to meet the regulations.

A new manager for the service was appointed in February 2015 and was registered with us in July 2015. This meant the provider had met their legal responsibility to have a registered manager in place as this was a condition of their registration.

Organisations registered with CQC have a legal obligation to notify us about certain events, so that we can take any follow up action that is needed. The registered manager had ensured systems were in place to ensure we were notified and that they fulfilled their legal responsibility.

We saw that there were systems in place to monitor the quality of the service, and quality audits were undertaken. This included audits of medicine management, care records, health and safety and accident and incidents. We saw that the manager had carried out audits on key areas of service delivery and action plans identifying how and when improvements would be made were in place. For example she had carried out a meal time audit and as a

result of this had identified how the meal time experience would be improved for people. This included promoting hand hygiene and improving how the table is prepared for the meal time so it is a more enjoyable experience.

Records of incidents and accidents had been improved since our last inspection. There were systems in place to record, investigate and analyse the information. There were records to show that action was taken by the manager to minimise the risk of reoccurrence.

We saw that the manager was visible in the home. We saw throughout our inspection that the manager led by example guiding and supporting staff and modelling a positive response to people's needs. Staff responded well to the manager's guidance and this ensured an open and inclusive culture. A staff member told us, "We have worked hard. It is a happier and nicer place to work". Another staff member told us, "Things are well organised now. It is much better for the people living here. We are allocated tasks so we know who is doing what".

All staff told us that they felt listened to and were able to give an example of things that had improved at the home since our last inspection. Staff told us that they enjoyed their work and worked well as a team and felt valued. A staff member told us, "[Manager's name] Is so good. She is really approachable and helpful. I can go to her about anything". Another staff member told us, "[Manager's name] is brilliant. We work as a team now and bounce off each other". Staff were clear about their responsibilities to report any concerns about people's care or wellbeing and knew how to do this. Staff said they felt supported and that they were confident that they could approach the manager and that they would be listened to. Staff were consistently positive about the leadership of this home.