

Precious Homes Limited

Ulysses House

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Ulysses House is a residential care home which can support up to six people. At the time of the inspection Ulysses House was providing personal care to five people aged under 65 with learning disabilities. The service can support up to six people. While the service was a large home and bigger than most domestic style properties they had worked to adapt the environment in line with Registering the Right Support by considering the building design fitting into the residential area and the other large domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

People living in the service were safe. The provider assessed known risks presented by people and developed appropriate measures to protect people from harm. We found the recruitment processes was thorough and staff were recruited safely. People received their medicines as prescribed and medicines were stored safely. We saw the home was clean and free of odours. Any incidents and accidents that occurred in the home were recorded and monitored for trends to reduce the likelihood of reoccurrence.

The manager was new in post though had made a positive impact on the moral and supported staff to be able to deliver good care to people. The manager was part of the team and visible to all staff and people living in the service. Clear expectations about the quality of care delivered were apparent through the systems implemented by the manager. People and their families were involved as much as possible in the care delivery. The manager worked effectively with external professionals to ensure positive outcomes. The manager understood and adhered to their duty of candour to be open and honest with people and their families when things went wrong.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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 Outstanding (published 05 September 2018)

Why we inspected

We received concerns in relation to the management of staffing, risk and incidents. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

The overall rating for the service has changed from Outstanding to Good. This is based on the findings at this inspection.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Ulysses House

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

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

Notice of inspection

This inspection was unannounced.

What we did before the inspection

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 reviewed information we had received about the service since the last inspection. We sought feedback from professionals who work with the service.

This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We were unable to speak with people who used the service as they were not able to use verbal

communication. A SOFI could not be completed as people were very active and moved throughout the home. We spent time observing people over the course of the day to understand their experience of the care they received. We spoke with four relatives about their experience of the care provided. We spoke with six members of staff including the manager, team leader, senior care worker, and care workers. We also spoke with one family member.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two 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 has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People living in the service were safe. A family member told us, "Yes [name] is very safe."
- The provider had robust safeguarding systems and processes in place and staff knew how to use these systems to keep people safe.
- Staff we spoke with were knowledgeable about the different types of abuse people may be subject to. They told us they were vigilant for signs of abuse because people had communication difficulties. One staff member told us, "I feel everyone is doing an amazing job and everyone is kept safe."

Assessing risk, safety monitoring and management

- The provider assessed known risks and appropriate measures were in place to protect people from harm.
- Staff were knowledgeable about people's risks and told us they felt confident managing risks. One staff member told us, "We look at the risks for the activity and behaviour and what measures we need to put in place."
- We found risk assessments to be person-centred with important information about how to keep the person safe. This detailed information was accessible to all staff. A member of staff told us, "We can access these on the [electronic devices] where we record notes."

Staffing and recruitment

- We found the provider had robust recruitment processes which promoted people's safety. We saw the provider continued to recruit staff safely through the requirement of references and application to the Disclosure and Barring Service (DBS). A DBS check enables a potential employer to assess a staff member's criminal history to ensure they were suitable for employment.
- The number of care staff on duty during our inspection was sufficient to meet people's needs. The manager had procedures which ensured sufficient numbers during times when staff were unwell. One staff member told us, "Yes this is enough staff and enables us to take people out especially as they have 2:1." Another staff member told us, "There are plenty of staff on duty, I've never worked in a place where there are quite so many staff on duty which is great."

Using medicines safely

- We found there were robust procedures in place to ensure people received their medicines as prescribed and medicines were stored safely.
- We saw protocols were in place for peoples 'as required' medicines so staff knew what action to take before the medicines were given.
- Staff told us they follow medicine procedures when administering medicines and follow people's care

plans. One staff member said, "Our procedure is person-centred as we take the medication to people and support them how they like to be supported."

Preventing and controlling infection

- We saw the home was clean and free of odours.
- The manager had cleaning schedules in place which identified regular deep cleans of the home to prevent and control infection.
- We found staff used PPE effectively and used a colour coded system to prevent cross contamination.

Learning lessons when things go wrong

- We found the provider had a system to record incidents and accidents which occurred in the home.
- We saw incidents and accidents were reviewed for trends and the outcomes informed updates to care plans and risk assessments to reduce the likelihood of reoccurrence. These were then shared to the team through team meetings.

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 Outstanding. At this inspection this key question has now been rated as Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The manager maintained a regular and robust audit system to identify areas requiring attention and developed action plans to address these areas. For example, development work on the building, including people's rooms to enhance people's lives had been identified and work had commenced.
- The manager was visible to all staff and people living in the service which prompted an open inclusive and empowering culture as the manager was always available to people living in the service.
- The manager had clear expectations about the quality of care delivered and communicated this to staff through regular meetings and supervisions. We saw supervisions were completed regularly for all staff working in the service.
- Staff told us they felt proud to work at the service, one person told us, "It is a good place to work." Another told us, "The morale is really nice, and you can just talk to people; it feels like a family."

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 their legal obligation to submit statutory notifications relating to key events as and when they occurred at the service, and to be open and honest when things go wrong.
- We saw a relative had complained and the manager recognised they had not done everything they should. The manager apologised for this and took action to rectify the concern. The person's relative told us, "[Manager's name] is very good at listening he is very good at being forth coming."

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

- The manager was new in post, and in the process of registering with the Commission at the time of inspection.
- The manager was clear about their role and understood their legal requirements of the law to notify us of all incidents of concern, including safeguarding alerts, serious incidents and deaths.
- Unannounced spot checks to review staff working practices and competency when undertaking their duties were regularly completed by the manager to ensure care delivery was of a good quality.

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

- We found the manager involved people as much as possible, through their preferred communication

methods.

- The manager promoted family involvement in the form of forums and workshops where staff could learn more about people living in the service from their family members. A relative told us, "They have asked me to go and be involved in the team meeting to support the staff and for me to be involved in the absence of my daughter's voice."
- People, staff and relatives were encouraged and provided with regular opportunities to input to the development of the service through meetings, surveys and the introduction of a suggestion box. Any comments made were reviewed, and clear development plans developed to drive improvement.

Continuous learning and improving care

- The manager had invested in the development of their staff to continually improve care. This included the employment of a new deputy manager to provide further support to staff and people.
- We read in the previous team meeting minutes the registered manager had discussed sourcing additional activities and appointed a staff member to lead this. During our inspection the member of staff confirmed to the manager they had booked additional autistic friendly activities, including sensory rooms.

Working in partnership with others

- The manager worked effectively with external professionals when required. For example, we saw the manager and staff were working with positive behaviour support coaches to better manage people's behaviour.