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Mereside Residential Home for People with Learning Disabilities

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This inspection took place on Wednesday 7 June 2017 and was unannounced. The home was rated 'good' at our previous inspection visit on 5 January 2015, and has remained a good service.

The service is family run home for a maximum of 15 people who have learning disabilities and/or autism. At the time of our visit, there were 14 people who lived in the home. The provider was also the registered manager.

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.

People felt safe living at Mereside. Staff understood how to protect people from harm, and provided good support to reduce identified risks. There were enough staff available to meet people's needs, and staff recruitment procedures meant staff did not work at the home unless robust checks had been undertaken.

People and staff got on well with each other. People and relatives thought staff were very supportive and caring. People's privacy and dignity was upheld, and staff respected people's wishes. Family and friends were welcomed to visit the home at any time.

People enjoyed their meals and the choices available to them. They were encouraged to be involved, when possible, in the preparation and cooking of food.

Staff received training and support to provide effective care for people. Medicines were managed safely and Deprivation of Liberty Safeguards were in place where required.

People were encouraged to be as independent as they could be, and were supported to be involved in work and leisure activities that suited their needs. People were involved in decisions about their care and support. Care and support records provided good information about people's needs, likes and dislikes.

People, relatives and staff thought the management of the home were approachable and responsive to their needs. They could informally or formally approach management with concerns or issues for discussion. No formal complaints had been made.

There were effective management systems to assure people were safe and quality care was provided.

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 remains Good.	Good ●
Is the service effective? The service remains Good.	Good ●
Is the service caring? The service remains Good	Good ●
Is the service responsive? The service remains Good.	Good ●
Is the service well-led? The service remains Good.	Good ●

Mereside Residential Home for People with Learning Disabilities

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 7 June 2017 and was unannounced. The inspection was carried out by one inspector.

Before our visit we reviewed information received about the service, for example the statutory notifications the service had sent us. A statutory notification is information about important events which the provider is required to send to us by law.

We contacted the local authority commissioning team. Commissioners are people who contract services, and monitor the care and support when services are paid for by the local authority. They had no further information about the service.

During our visit we spoke with four people who lived at Mereside. We also spoke with four staff, the deputy manager, the general manager and registered manager who was also the provider. After our visit we spoke with three relatives by telephone. We looked at two care files, medicine records, training records, accident and incident records and quality assurance documents.

Is the service safe?

Our findings

People who lived at Mereside continued to feel safe living at the home. They told us they felt safe, and if they had concerns they would feel able to talk to staff and the management of the home. One person told us they liked being able to lock the door to their room.

We asked staff new to the home since our last visit how they kept people protected from abuse and harm. They understood the action to take if they had concerns a person was being abused, and had received safeguarding training to help them with their knowledge of abuse and actions to take. The registered manager understood their responsibilities to report safeguarding concerns to the local authority safeguarding team.

Risks associated with people's care and welfare had been assessed by the home's management team and plans had been put in place to reduce the likelihood of people being put at risk. Staff understood the risks associated with each person and worked well with people to support them with their safety. For example, behaviour plans were in place to support people who might become agitated. These plans identified what the triggers might be, and how staff could diffuse any potential challenging situations.

Reports of accidents and incidents were analysed to see what lessons could be learned and whether additional safety measures needed to be put in place.

There were enough staff during the day and night to support people's needs. Staff undertook a range of scheduled duties at different times of the day. For example, they might be on cleaning duty in the morning, but care duty in the afternoon. This gave the service flexibility to change staff roles if a member of staff was unwell or on holiday.

New staff told us they did not start working at Mereside until all their recruitment checks had been carried out. This included Disclosure and Barring Service (DBS) checks and reference checks. The DBS is a national agency that keeps records of criminal convictions.

People received their medicines as prescribed. Staff were trained to administer people's medicines, and records accurately reflected medicines administered. Medicines were stored safely and securely. In 2016, the home was audited by the Solihull hospital pharmacy technician. All required actions arising from their report had been addressed.

Premises were well maintained and checks were made on fire systems, water systems and electricity to ensure they were safe. We found one piece of moving equipment was rusty and was a potential risk to people. The manager agreed on the day of our visit to make sure this was made safe or replaced.

Is the service effective?

Our findings

People who lived at Mereside continued to receive effective care and support from staff who had been trained to meet their needs. One member of staff told us they felt the training and support they had received had been 'amazing'. Another said, "On the whole it (the training) has been really good. It focused on each person's individual needs."

New staff told us they had completed an induction to the home and had undertaken the Care Certificate. The Care Certificate is expected to help new members of staff develop and demonstrate key skills, knowledge, values and behaviours, enabling them to provide people with safe, effective, compassionate, high-quality care.

The service had recently changed the way they provided training and now offered staff training in an 'on-line' format. This gave them more flexibility in offering training to staff. Training that required practical input, such as moving and handling people, continued.

Staff had regular individual supervision meetings with their manager to support them in their work. The registered manager said they were always available to staff if they had any concerns or queries about their work. A member of staff told us they found supervision useful because it helped them to see other people's point of view in how they worked, and told them what they were doing well and what they could improve on.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We found the service had followed the guidance given by their local DoLS team and sent applications to the team for all people who lived at the home. Some DoLS had subsequently been approved and the service was working in line with the approvals.

We saw people made their own decisions about how they wanted to live their lives and how they wanted to be supported on a day to day basis. Staff understood the importance of gaining people's consent before providing support.

People were happy with the food provided and the choices they received. One person told us the food was, "As good as ever" and went on to say there was, "Plenty of food." A relative told us their relation told them the food at Mereside was better than what they had when they returned home. We saw people were encouraged to make their own snacks at lunchtime and had a choice of meal at dinner time. During the day we saw people drank hot and cold drinks of their choice at the times they wanted them.

Staff monitored all people's weights, blood pressure levels and pulses on a monthly basis. We discussed this was only necessary for people where a healthcare professional had advised this course of action, and not for

all people who lived at Mereside. The registered manager agreed to change this practice.

People's physical and emotional healthcare needs were supported well. People told us they saw the GP when they felt unwell, and on the day of our visit one person was visiting the dentist. A relative told us their relation had been very unwell last year and was admitted to hospital. They told us one of the management team, who had known the person for a long time, was always with them to support them. Another relative told us of the support their relation had been given to encourage them to have an operation which was important for the person's future health and well-being.

During our visit we also spoke with a consultant clinical psychologist who had met with one of the people who lived at the home. They told us that staff worked collaboratively with them in supporting people's psychological needs. They said they felt people who lived at Mereside received good care and support.

Is the service caring?

Our findings

At this inspection we found people were cared for and supported as well as they had been at our previous inspection. A person told us, "The staff are very kind." A relative told us, "It is a fantastic home; it is not 'a home' but 'their home.'" Another relative told us staff provided, "Excellent care." A member of staff told us, "Everyone treats everyone like family. We want people to feel at home because it is their home."

There was a friendly atmosphere in the home where people were very comfortable in the company of staff. We saw conversations between people and staff which demonstrated staff knew people well. During our visit an incident happened which meant one person needed staff to respond to them quickly. We saw staff did this in a sensitive and caring way, providing practical action which relieved the person's discomfort.

People were involved in making decisions and planning their own care. Individual members of staff were 'key workers' to people who lived at Mereside. People and their key workers met each month to discuss the person's needs and personal goals.

Staff encouraged people to be as independent as possible and to be involved in the daily life of the home. For example, one person liked to open the door to people and make sure they signed the visitor's book. People were encouraged to tidy their rooms, and do daily chores where they were able. A relative told us their relation had grown in confidence since coming to Mereside. They said it was, "The best thing they had ever done," arranging for them to live at the home, because the person was 'blossoming' and becoming more independent.

People had their own bedrooms with en-suite facilities. They could, if they chose to, spend their time in the privacy of their own room. We saw people's right to privacy was respected. For example, staff knocked on people's doors and waited for a response before they went into their rooms.

Friends and relatives of people who lived at Mereside were able to visit at any time during the day or evening. One relative told us they could 'turn up' at any time and always felt welcomed. Another relative agreed, and added there was never a time they had visited when they were concerned about the way staff treated either their relation, or any other person who lived at the home.

Is the service responsive?

Our findings

The service was as responsive to people's needs at this inspection as they were at the previous inspection.

Staff told us they read people's care plans and got to know about people through being with them on a daily basis. One member of staff told us, "It is amazing how quickly by speaking every day to people, you pick up on things."

Care plans were in the process of being transferred to a computer based system. During our visit we saw one which was very person centred and another which was less detailed. The registered manager confirmed all care plans would be as detailed as they previously were prior to the transfer. After our visit we were sent a copy of the updated care plan which showed the detail which was lacking during our visit.

People were encouraged to maintain their interests and be involved in social activities. One person enjoyed gardening. During our visit they told us they helped to mow the lawn, and showed us the potatoes they had grown. They also showed us seeds they had planted which they hoped would grow into cucumbers and peppers. They showed us outdoor lights which had been put in the garden because another person enjoyed sensory objects.

Other people liked supporting staff with getting the shopping for the home, and going on daily walks. A relative told us their relation liked going out for walks with staff and going into a coffee shop for a drink and cake. People also told us they had worked in a shop and on a farm.

A number of people who lived at Mereside undertook activities at the local day centre. Those who wished to stay at home had the opportunity of being involved in planned activities within the home. On the day of our visit, salt dough was being moulded into shapes and baked so people could make ornaments. A member of staff told us, "I think people have a great life here." They told us about the holiday people had recently been on in Blackpool, which people had enjoyed.

There had not been any formal complaints raised since our last visit. The registered manager told us they had an 'open door' so if anyone had any concerns they would be available to hear them. During our visit, we saw people were comfortable telling staff and the management team what they thought. We looked at the complaint policy and saw there was no timescale for a response to a complaint. The registered manager said they would change this, and after our visit confirmed this had been done.

Is the service well-led?

Our findings

The home was as well-led at this inspection as it was during our previous inspection visit. A relative told us, "I can't believe the luck that we were able to get [person] into such a lovely and homely place."

The provider of the service was also the registered manager. 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.

The provider had a management team to support them. This comprised of the general manager and recently appointed deputy manager. Each person in the team was aware of their specific roles and responsibilities but coordinated well with each other to ensure the service provided quality care and support to people.

People, relatives and staff all felt the management of the service were open and approachable. One relative told us, "Absolutely, I could talk to them if I had concerns." The service had an open door policy where all people involved in the home could discuss issues with the management team, but also had more formalised meetings for people and staff.

We found managers to be responsive to change. For example, we were told the recent holiday to Blackpool had been reduced in length as they felt this would benefit people who lived in the home. However feedback suggested it benefited some, but others felt there was too little time to do all they wanted. They were therefore reconsidering how best to plan future holidays to ensure it met all people's needs.

A recent quality audit sent out to relatives of people who lived at the home showed very good outcomes. Half of those who responded gave the home a rating of 'Excellent' with the majority of the remainder giving the home a rating of 'good.' People who lived at the home were going to be asked their views in the near future. They undertook a yearly questionnaire which asked a range of questions about people's experiences.

The registered manager understood their responsibilities and the requirements of their registration. They understood the importance of sending us notifications. Not all required notifications had been received however this was as a result of a misunderstanding which was clarified on the day of our visit. The provider had a legal requirement to display their ratings. They had displayed their rating by the front door of the home.