

Autism Care (UK) Limited

The Cottage

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

The Cottage is a residential care home providing personal care for a maximum of 10 people in one purpose-built house. The service provides support for people who live with autism and a learning disability. There were 9 people living at The Cottage at the time of the inspection.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

People's experience of the service and what we found:

Right culture:

Systems were in place to monitor the quality of the support and services provided for people. However, the provider had not resolved identified shortfalls within the environment in a timely manner.

Support was person-centred and promoted people's individuality, well-being and dignity.

There was a culture of openness, inclusivity and partnership working which enabled people to live meaningful lifestyles.

Right Support:

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.

Risks to people's health, safety and welfare were assessed and mitigated. Lessons were learned from accidents and incidents and used to improve the support people received.

Staff supported people with their medicines in a safe way.

Right care:

People were protected from abuse and poor care by staff who understood how to recognise and report incidents of this nature.

There were enough safely recruited and well-trained staff available to meet people's needs.

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 (published 23 August 2023).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'All inspection reports and timeline' link for The Cottage on our website at www.cqc.org.uk.

Enforcement

We have identified a breach in relation to the governance at this service.

Please see the action we have told the provider to take at the end of this report.

Follow Up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

The Cottage

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector

Service and service type

The Cottage is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Cottage is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was unannounced .

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

Not all of the people who lived at The Cottage were able to fully express their views and experiences, so we observed the care and support they received. We also spoke with 3 family members, the registered manager and the deputy manager and 4 support workers. We reviewed 2 people's care records and multiple medication records. We also reviewed a range of records relating to the management of the service, including staff recruitment records policies and procedures.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

People were protected from the risk of infection as staff were following safe infection prevention and control practices.

- The Cottage environment was clean and staff understood and followed infection control procedures. The management team carried out regular checks in relation to cleanliness and infection prevention and control measures, and took action to address any shortfalls highlighted.
- Although staff made every effort to maintain a high standard of cleanliness and hygiene within The Cottage, the provider's maintenance and refurbishment arrangements were not effective in supporting this in a timely manner. We have addressed this issue in the well-led section of this report.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

People were safeguarded from abuse and avoidable harm.

- Staff received training about how to keep people safe from abuse and avoidable harm. They knew how to identify and report any concerns and felt supported by the management team to do so. Relatives told us they felt their loved ones were supported in a safe way and any concerns they may have would be dealt with quickly and effectively.
- Records showed the management team openly and honestly reported any allegations of abuse to the local authority and CQC in line with policies and procedures.

Assessing risk, safety monitoring and management

The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.

- Risks associated with people's needs had been identified, assessed and actions put in place to mitigate the risk. We observed staff following risk management plans effectively throughout the inspection. Accidents and incidents were reported and reviewed to help identify if any further measures could be taken to reduce risks.
- Relatives told us risks were well managed. One relative said risks were managed, "Magnificently." They added, "[Staff] manage to balance the risk and [name's] liberty so it is not restrictive." Another relative said, "Staff manage risks very well and [name] still has a full life."

Staffing and recruitment

The provider ensured there were sufficient numbers of suitable staff.

The provider operated safe recruitment processes.

- During the inspection we saw people received support at the times they requested or needed it. Relatives and staff told us there were always enough staff to ensure people's assessed needs and commissioned support hours could be met.

- Pre-employment checks were in place, including Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

People were supported to receive their medicines safely.

- Staff who administered medicines had been trained and had their competency regularly assessed to do so.
- Medicines records showed people received their medicines as prescribed.
- The principles of STOMP (stopping over medication of people with a learning disability, autism or both with psychotropic medicines) were followed.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

Learning lessons when things go wrong

The provider learned lessons when things had gone wrong.

- Systems were in place to analyse and learn from events that occurred in the home.
- Staff told us learning was shared across the team through handover discussions, team meetings and supervisions sessions.

Is consent to care and treatment always sought in line with legislation 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 MCA 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider was working in line with the Mental Capacity Act.

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 our last inspection we rated this key question Requires Improvement. At this inspection the rating has remained Requires Improvement. This meant some parts of service management was inconsistent.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- At our last inspection we found the provider's quality assurance systems had not been effective in addressing essential refurbishment of the home.
- At this inspection, we saw minor day to day maintenance was completed in a timely way. However, the registered manager told us and records showed some areas requiring refurbishment and maintenance had been reported as early as January 2023 and no dates had yet been confirmed for work to be carried out.
- We saw examples such as bathroom walls and ceilings with holes where fixings had been removed; a toilet cistern with damaged sealing around the wall; damage to the dining room walls including poor decoration, and mould accumulation in a shower room.
- As noted in the safe section of this report, the registered manager and staff made every effort to maintain high standards of cleanliness and hygiene. However, the provider's continued lack of responsiveness to environmental issues showed a lack of respect for people's dignity.

The provider's systems remained ineffective in responding to and resolving identified issues within the environment in timely manner. This was a breach of Regulation 17 of the Health and Social Care Act 2008, (Regulated Activities) Regulations 2014.

- At our last inspection we found there was not enough permanent staff employed to ensure consistent support for people. At this inspection there was a full compliment of permanent staff available to support people.
- The registered manager and staff were aware of their respective roles and responsibilities. Staff told us there was an organised and supportive atmosphere within the home.
- The registered manager undertook audits to review the quality of support people received. These were effective in identifying areas for improvement and resolving issues within the registered manager's span of control.
- Staff told us they received regular training to ensure they continued to improve the support people received. Staff also told us and records showed how learning shared across the team through handover discussions, team meetings and supervisions sessions, had led to a marked reduction in people experiencing distress.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

There was a positive and open culture at the service.

People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.

- We found the atmosphere within the home, throughout the inspection, was positive. People's individuality was promoted, their protected characteristics were respected and they actively engaged with staff.
- Support plans focused on helping people to achieve goals that were important to them and promoted their well-being. Plans were regularly reviewed to ensure they remained current and people received the support they wanted and needed.
- Staff demonstrated an in-depth knowledge of how people communicated their needs and wishes and how they preferred to be communicated with. This was particularly important in enabling people who did not use a verbal language to be involved, express their views and retain control of their daily lives.
- Relatives were complimentary about the level of consultation and involvement they had in their loved one's lives and the running of the home. One relative told us when speaking about this, "It's definitely the best place. Another relative described the registered manager and staff as, "Fantastic," when speaking about the personalised support their loved one received.

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 provider understood their responsibilities under the duty of candour.

- The registered manager submitted statutory notifications to CQC about events that happened in the home.
- A relative commented, "There is really good communication, truthful and no covering up."

Working in partnership with others

The provider worked in partnership with others.

- Relatives and external professionals told us the registered manager and staff worked well with them to ensure people received high quality, person-centred support.
- We saw an example in which the registered manager and GP practice staff had worked together to develop a more person-centred approach when people needed routine healthcare such as vaccinations or blood tests. This had helped to reduce the distress some people experienced in these circumstances.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance The provider's systems remained ineffective in responding to and resolving identified issues within the environment in timely manner.