

Royal Mencap Society

22 Queensberry Road

Inspection report

22 Queensberry Road
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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 inspection took place on the 25th August 2015 and was unannounced.

The home provides care and support for people with learning disabilities. At the time of our inspection there were 5 people living there.

There was a registered manager in post at the time of our inspection. 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.

There were appropriate recruitment processes in place and people felt safe in the home. Staff understood their responsibilities to safeguard people and knew how to respond if they had any concerns. There were enough staff deployed to support the individual needs of people.

Staff were supported through regular supervisions and undertook training which focussed on helping them to understand the needs of the people they were

Summary of findings

supporting. People were involved in decisions about the way in which their care and support was provided. Staff understood the need to undertake specific assessments where people lacked capacity to consent to their care and / or their day to day routines. People's health care and nutritional needs were carefully considered and relevant health care professionals were appropriately involved in people's care.

People received support and care from staff that were kind, considerate and respectful. Their needs were assessed prior to coming to the home and individualised support and care plans were in place and were kept under review. Staff had taken time to understand people's likes, dislikes and enabled people to participate in activities either on an individual basis or within groups.

People were cared for by staff who were respectful of their dignity and who demonstrated an understanding of each person's needs. This was evident in the way staff spoke to people and the activities they encouraged and supported individuals with. Relatives spoke positively about the care and support their relative was receiving and felt that they could approach management and staff to discuss any issues or concerns they had.

The manager was approachable and open to feedback; actively enabling staff to look at ways to improve and develop the service and liaising with commissioners to secure the necessary funding to ensure people had as full and enriching life as possible. There were a variety of audits in place and action was taken to address any shortfalls.

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 and their families said they felt safe

Staff understood their roles and responsibilities to safeguard people and were supported by appropriate guidance and policies.

Risk assessments were in place which identified areas where people may need additional support and help to keep safe

Health and Safety Audit undertaken and Fire alarms were regularly tested.

There were appropriate recruitment practices in place which ensured people were safeguarded against the risk of being cared for by unsuitable staff.

There were safe systems in place for the administration of medicines.

Good



Is the service effective?

The service is effective

People received support from staff that had the skills and experience to meet their needs.

All staff received regular supervision combined with an on going appraisal.

The staff training program was focused on ensuring they understood people's needs and how to safely meet these.

People were involved in decisions about the way their support was delivered.

Staff understood their roles and responsibilities in relation to assessing people's capacity to make decisions about their care.

People were supported to eat a healthy balanced diet.

People's health care needs were regularly monitored.

Good



Is the service caring?

The service is caring

People received their support from staff who treated them with kindness, consideration and respect.

People's individuality was respected by staff.

People were encouraged to express their views and to make choices.

Family and friends were welcome to visit anytime.

Good



Is the service responsive?

The service is responsive

Good



Summary of findings

People's needs were assessed before they came to live at the home to ensure that all their individual needs could be met.

Support Plans contained all the relevant information that is needed to enable people to be as independent as possible and achieve their goals.

People's needs are continually kept under review and relevant assessments are carried out to help support their care provision.

Staff spent time with people and responded quickly if people needed any support.

There was written information provided on how to make a complaint and people were given the opportunity to raise any complaints at monthly house meetings.

Is the service well-led?

The service is well-led

Communication between people, their families and the service was encouraged in an open way.

People using the service, their relatives and other services which the people accessed were encouraged to provide feedback about their experience of care and about how the service could be improved.

There was culture of openness and a desire to continually improve to provide the best possible person centred support and experience for people.

Quality Audits were carried out and action taken to address any shortfalls.

Good



22 Queensberry Road

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 25th August 2015 and was unannounced. The inspection team comprised of one inspector.

We looked at information we held about the service including statutory notifications. A notification is information about important events which the provider is required to send us by law.

We contacted the health and social care commissioners who help place and monitor the care of people living in the home and other authorities who may have information about the quality of the service.

We spoke with the five people who used the service, four support staff, one apprentice and the registered manager. We were also able to speak to a number of relatives who agreed to be contacted.

We looked at two records for people living in the home, five staff recruitment files, training records, duty rosters and quality audits.

Is the service safe?

Our findings

People indicated that they felt safe and their relatives were confident that their loved one was safe in the home. Staff understood their roles and responsibilities to safeguard people and knew how to raise a concern if they needed to do so. Telephone numbers for both CQC and for the Northamptonshire County Councils safeguarding team are in the office. Staff told us that they felt able to raise any concerns around people's safety to the manager and outside agencies if they felt they needed to. They were supported by an up to date policy and told us they knew they would need to complete notifications about safeguarding matters to CQC and the Local Authority if they arose. Staff had not needed to make any safeguarding notifications in the last twelve months.

There were a range of risk assessments in place to identify areas where people may need additional support and help to keep safe. For example, people who had been assessed for support with bathing had a risk assessment in place detailing the level of support needed and all staff had been required to sign it. This enabled people to retain their independence but ensured that any potential risks to their safety were mitigated.

There were regular Health and Safety audits in place and fire alarm tests were carried out each week. A recent monthly environment audit had highlighted the need to review the height of the bath on the top floor and plans were in place to have the bathroom altered to ensure that there was not too steep a step out of the bath. Each person had a personal evacuation plan in place and there was information about each person held within an emergency folder which detailed how each person liked to be communicated with and what things may upset them which would be shared with relevant people in the event of an emergency.

There were appropriate recruitment practices in place. This meant that people were safeguarded against the risk of being cared for by unsuitable staff because staff had been checked for any criminal convictions and satisfactory employment references had been obtained before they started work at the home.

There was a tool in place to work out the ratio of staff required to meet the needs of the people which also took account of any forthcoming appointments or events for individuals which would require additional staff to support them. Records showed that staffing levels were always in line with the assessed needs and that where needed relief staff were used to ensure that the levels of staff remained consistent. The manager confirmed that they had a small pool of regular relief staff who knew the people and the home. They were also in the process of recruiting volunteers to provide additional support to people to enable them to access more activities outside of the home.

We observed that staff responded to requests from people within a couple of minutes. The staff felt there were enough people on shift and when we spoke to relatives they felt there was normally enough staff.

There were safe systems in place for the management of medicines. MARS sheets had been completed and there had recently been an audit undertaken by the local pharmacy which had highlighted some minor improvements. Staff received training before taking on the responsibility to administer medicines and their competencies had been assessed. Yearly observational competency reviews were undertaken by the manager which were recorded on staff training records.

Is the service effective?

Our findings

People received support from staff that had the skills and experience to meet their needs. All new staff undertook a twelve week induction programme which comprised of seven days classroom based training and four to six opportunities to shadow more experienced staff before working on a shift. New staff completed an induction handbook which involved undertaking competency based training and observations. We spoke to two staff members currently on their induction and they felt that they were very well supported and were gaining the confidence and skills to undertake their role.

All staff had 'Shape your future' supervision sessions with the manager. These were a combination of supervision and on-going appraisal and personal development meetings held every twelve weeks. In between the sessions staff were able to have informal supervisions. Staff said that these sessions were valuable and that they felt able to speak to the manager at any time if they needed to. The staff training program was focused on ensuring they understood people's needs and how to safely meet these. All staff had completed the training they needed and there is regular updated training available to help refresh and enhance their learning. One member of staff told us about the Autism training they had undertaken, they explained how it had helped them to reflect on their practice and enabled them to have a greater understanding on how each person had individual traits which needed to be responded to in different ways. The staff said that as a team they felt able to address issues together to ensure they had a consistent approach in supporting the people living in the home.

Staff understood their roles and responsibilities in relation to assessing people's capacity to make decisions about their care. They were supported by appropriate policies and guidance and were aware of the need to involve relevant professionals and others in best interest and mental capacity assessments. Capacity assessments had been

undertaken and as agreed under the Deprivation of Liberty Safeguards appropriate action was taken to help mitigate risks to protect people from risks that they themselves were unable to manage. We observed that staff supported people who wanted to go out. Families were consulted and kept informed of any impact on the way in which people are cared for and supported. One relative said that they were relieved that safeguards had been put in place to protect their relative; another explained they had been involved with end of life planning.

People were supported to eat a healthy balanced diet. Each week the people living in the home plan together a weekly menu and individuals were supported to go out shopping for the agreed menu. People said they liked the food and were able to have some of their favourite food. Some people helped in the preparation of the meals. Everyone was encouraged to sit down together to have their evening meal. Staff were aware of individual dietary needs and supported people to make the healthier choice. Each person had a daily diary which included what they had eaten during the day this enabled staff to be aware of any shortfalls or excesses in people's diets. The dietician had been consulted and two people were on a calorie controlled diet to manage their weight.

People's health care needs were regularly monitored. People were referred to the GP and specialist services as required. There was a system in place which identified when routine health checks were due to enable the Manager to ensure there were enough staff to support an individual to attend appointments. To enable health professionals to communicate with individuals information was available to share with professionals explaining how an individual liked to be approached and how they may show whether they were happy or not. One relative said that when they had asked for their relative to access a chiropodist more than once a month the staff promptly arranged for a visit every two weeks.

Is the service caring?

Our findings

People received their support from staff who treated them with kindness, consideration and respect and who took time to engage in conversation with them. When we spoke to people they were able to indicate they were happy and liked the home. One person said they had helped to choose the decoration in the lounge and pointed to the new colours on the wall. Staff and people had worked together to personalise their environment to make them feel at home and comfortable. There was a box containing lots of magazines which was for one person who enjoyed cutting and sticking pictures. One person took us to their room and told us that they had chosen the colour for their room which was to be redecorated. In one bedroom a large table had been purchased to enable the person to pursue their hobby of making up jigsaws. We spoke to the person in their room who told us they felt happy and safe in their room.

Staff were mindful and considerate of people's wishes when asking if they could enter their rooms. People's individuality was respected by staff; responding to people by their chosen name and talking to people about the things they had been doing that day. One person asked the

staff member to go through their daily diary to help them to remember what they had been doing. It was clear from the interactions we witnessed that the staff knew people very well and were able to respond to people when they were unhappy or anxious. We observed that people appeared relaxed around staff and would call them if they needed them. Relatives told us "Excellent service" "Quite happy with everything", "X sees this as their home and is always keen to get back home".

People were encouraged to express their views and to make choices. Care plans included detailed information about people's preferences, their likes and dislikes, how they liked to be treated and gave comprehensive accounts about individuals to enable all staff and any professionals working with a person to gain as much knowledge and understanding of the person's individual abilities and goals.

Family and friends were welcome to visit anytime and people were enabled to stay in contact with their families through regular telephone calls and visits to family. There had recently been a house barbeque where all family and friends had been invited. One relative had commented "Lovely afternoon, relaxed environment, it was nice to see all the house mates together."

Is the service responsive?

Our findings

People's needs were assessed before they came to live at the home to ensure that all their individual needs could be met. We saw detailed assessment information and this was used to build a person centred support plan detailing what care and support people needed and their likes and preferences. People had been given the opportunity to visit the home prior to coming to live there so that they had an opportunity to meet the other people living there and the support staff.

Support Plans contained all the relevant information that is needed to enable people to be as independent as possible and achieve their goals. There were risk assessments in place covering all aspects of the person's life such as personal care, oral hygiene, cooking and mobility. People had accessed an advocacy service to help them to express their wants and desires. Staff demonstrated a good understanding of each person in the service and clearly understood their care and support needs. We observed staff interact with people in a confident and carefully considered manner and they were responsive to individual needs.

People were encouraged to follow their interests; for example one person loved to watch wrestling and in their room were posters of wrestlers and staff told us they took the person to any local wrestling events and also to the world wrestling competition. Another person liked horses and had statues and pictures of horses in their room and goes occasionally to a local stable.

People's needs are continually kept under review and relevant assessments are carried out to help support their care provision. The manager liaised with commissioners of the service to secure sufficient funding to enable people to

access the activities they needed which would enable them to live a fulfilled life. Support plans were reviewed on a regular basis and all staff were asked to sign them to ensure they understood the support needs of each individual and provide the necessary consistent approach required.

Staff spent time with people and responded quickly if people needed any support. When people did become distressed we saw that staff approached in a calming way and helped to alleviate any distress. As people came back from their daily activities they were welcomed back by the staff who spoke to them about their day and what they would like to do now they were home. One person was happy to go to their room to relax and unwind, another wanted to spend time talking to staff about their day and making a drink for themselves.

Weekly timetables were in place which enabled people to remember what they were doing and for staff to help support people to prepare for their various activities. These supported the aim of enabling people to remain as independent as possible and to meet their individual goals.

We spoke to one relative who explained how important it was for her relative to have a schedule in place so that they could be reminded of what was happening and what they needed to do for themselves.

There was written information provided on how to make a complaint and people were given the opportunity to raise any complaints at monthly house meetings. Relatives said that the manager was approachable and that if they had any concerns they would also be happy to talk to any of the staff team. The manager told us that they tried to resolve any concerns as quickly as possible and in the last twelve months since she had been at the home she had not received any formal complaints.

Is the service well-led?

Our findings

Communication between people, their families and the service was encouraged in an open way. Relatives told us that they felt involved in the care of their relative and always felt welcome at the home. They said both the manager and staff team were all approachable and created a nice atmosphere in the house. Regular house meetings were held which enabled people to express what they would like to do, whether they were happy or not and be informed of any changes in the staff team.

People using the service, their relatives and other services which the people accessed were encouraged to provide feedback about their experience of care and about how the service could be improved. Regular audits and surveys were undertaken and these specifically sought people's views on the quality of the service they received. People were generally happy and content and we saw comments from relatives such as "(Relative) receives excellent care from her carers, thank you"; another service provider had commented "Staff are very good and address any concerns for X. They take action almost immediately when we request; continue the good working relationship".

Staff worked well together, team meetings took place on a regular basis and minutes of these meetings were kept. The meetings enabled staff to give feedback on current practices in the home and an opportunity to share good practice. We read in a recent set of minutes that staff had taken on leads to develop the service such as compiling Life Books with people and establishing pens with friend's project which enables people to write to other people in other homes. We could see this would benefit a number of the people who liked writing and receiving letters. Staff told us that they were enabled and encouraged to address problems or concerns with each other and to work together to resolve things. They spoke of the need for being consistent in their approach with people and being able to agree this together has helped them to develop a better

relationship with each other and the people they support. There was culture of openness and a desire to continually improve to provide the best possible person centred support and experience for people.

The values of the service had been demonstrated through holding events which included families for example a house barbeque; visiting local schools and colleges to explain about the service and the abilities and achievements of people with learning disabilities.

Records were well maintained and regular audits were in place to ensure that all systems were being safely managed. The Area Manager visited on a monthly basis to undertake an audit to ensure all procedures were being adhered to and any health and safety concerns were being managed.

Quality assurance audits were completed by the manager to help ensure quality standards were maintained and legislation complied with. Where audits had identified shortfalls action had been carried out to address and resolve them; for example a redecoration programme was underway to improve the environment for everyone. People were involved in choosing colours for their rooms.

Records relating to the day-to-day management of the service were up-to-date and accurate. Support and Care records accurately reflected the level of support received by people and detailed what their mood was like that day to enable staff to support people in the most effective way.

There is an apprenticeship care scheme in place; currently there is one support worker who is almost at the end of their apprenticeship and will join the team as a permanent full time member of staff. They explained how good the opportunity was for them and how much they were enjoying the work which they were finding rewarding. The manager spoke of the benefits of being able to train and develop support staff and was currently looking for another apprentice.