

Green Light PBS Limited

Thornbury

Inspection report

West Tolgus
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Cornwall
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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

About the service:

Thornbury is a residential care home that accommodates up to two people living with learning disabilities or autistic spectrum disorder. At the time of our inspection one person was living at the home. The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen ' Registering the Right Support' CQC policy.

People's experience of using this service:

People were supported by staff who were caring, compassionate and treated them with the utmost dignity and respect. Any concerns or worries were listened and responded to and used as opportunities to improve.

The person received person centred care and support based on their individual needs and preferences. Staff were aware of their life history, and their communication needs. They used this information to develop positive, meaningful relationships with them.

The provider ensured the person had regular staff meaning the person and staff were able to build positive relationships. The person was supported by staff who had the skills and knowledge to meet their needs. Staff understood and felt confident in their role.

Staff liaised with other health care professionals to ensure the person's safety and meet their health needs.

Where people lacked capacity, staff worked with the local authority to make sure they minimised any restrictions on people's freedom for their safety and wellbeing.

Staff spoke positively about working for the provider. They felt well supported and that they could talk to management at any time, feeling confident any concerns would be acted on promptly. They felt valued and happy in their work.

Audits were completed by staff, the registered manager and provider to check the quality and safety of the service.

Thornbury is a leased property on a long term basis by Green Light PBS Limited who run a number of services within Cornwall. There is a clearly defined management structure and regular oversight and input from senior management. The ethos of the service is 'Empowering people to lead a lifestyle they are proud of.' Staff were aware and supported people to achieve this ethos.

More information is in Detailed Findings below

Rating at last inspection: This was the first inspection of the service.

Why we inspected: This was the first planned comprehensive inspection of the service. The service has an overall rating of Good.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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?

The service was safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our Well-Led findings below.

Good ●

Thornbury

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 checked 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.

Inspection team: The inspection team consisted of an adult social care inspector.

Service and service type: The service is a 'care home'. People in care homes receive accommodation and personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at on this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: This inspection was announced one hour before we arrived. This was to ensure the person and staff would be available to speak with us.

What we did: We reviewed the records held on the service. This included notifications. Notifications are specific events that the provider is required to tell us by law. We reviewed the Provider Information Return (PIR) submitted by the registered manager. This told us what the service had achieved and what they intend to develop in future. We require the provider to submit this annually and it provides us with information to plan our inspection.

The person living at Thornbury were not able to fully share with us their experiences of living at the service. Therefore, we spent time observing staff with the person in communal areas during the inspection.

During the inspection we spoke with staff, reviewed two staff recruitment and supervision files, one care record and records relating to health and safety, safeguarding and other aspects of the service. We spoke with three care staff, manager, operational manager and the behavioural analyst. Following the inspection visit we spoke with a relative to gain their views of the service.

Is the service safe?

Our findings

Safe- this means that people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Safeguarding systems and processes

- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate training in this topic area. The registered manager used team meetings to reflect on events in the service with staff to understand if they could safeguard people better or promote their rights.
- The provider's safeguarding policy was available to people in different formats such as 'easy read' to empower them to understand how to raise concerns.

Assessing risk, safety monitoring and management

- Risks to people's safety and wellbeing were assessed and managed. The person's care record included risk assessments considering risks associated with the person's environment, their care and treatment, medicines and any other factors. The risk assessments were detailed and included actions for staff to take to keep the person safe and reduce the risks of harm.
- Staff understood where the person required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe.
- People were supported to take positive risks to aid their independence. For example, what support mechanisms were needed when accessing the local community, or when preparing foods.
- The environment and equipment had been assessed for safety.

Staffing levels

- There were sufficient numbers of staff to meet people's needs. The provider ensured people had a consistent staff team.
- The person's staffing needs were calculated based on a local authority individual needs assessment, which were reviewed and updated regularly as people's individual needs changed.
- Staff had been recruited safely. All pre-employment checks had been carried out including reference checks from previous employers.

Using medicines safely

- Medicines were managed safely to ensure people received them safely and in accordance with their health needs and the prescriber's instructions. Staff were trained in medicines management and regular competency checks were carried to ensure safe practice.
- Medicines were safely received, stored, administered and returned when they were no longer required.

Preventing and controlling infection

- Staff had completed infection control training and followed good infection control practices. They used

protective clothing gloves and aprons during personal care to help prevent the spread of healthcare related infections.

Learning lessons when things go wrong

- Accidents and incidents were reported and monitored by the registered manager to identify any trends. The registered manager discussed accidents/incidents with staff as a learning opportunity.

Is the service effective?

Our findings

Effective- this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Assessments of people's needs were thorough and people's goals or expected outcomes were identified. Care plans were regularly reviewed to understand progress and make plans to support people to achieve their goals.
- Care was planned and delivered in line with people's individual assessments, which were reviewed regularly or when needs changed.

Staff skills, knowledge and experience

- People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs. The provider had a good system to monitor all staff had regular training and refresher training to keep them up to date with best practice. Training methods included online, face to face training and competency assessments.
- Staff felt well supported and had regular supervision and an annual appraisal to discuss their further development.
- New staff had completed a comprehensive induction.

Supporting people to eat and drink enough with choice in a balanced diet

- The person was supported by staff to maintain good nutrition and hydration.
- Staff supported the person with their menu planning, shopping and meal preparation. This was carried out in a way which ensured the person developed or used their skills to become or maintain independence and confidence.

Adapting service, design, decoration to meet people's needs

- The provider had ensured that it met the persons needs to enable them to be as independent as possible in a safe environment.
- The person was involved and had chosen their own decorating, furnishings and carpets for their own rooms.

Supporting people to live healthier lives, access healthcare services and support

- When the person required support from healthcare professionals this was arranged and staff followed guidance provided by such professionals. The person had received support to maintain their health with regular access to GP's, dentists and other services. They also received an annual health check as per best practice for people with a learning disability.
- Information was recorded ready to be shared with other agencies if the person needed to access other services such as hospitals.

Ensuring consent to care and treatment in line with law and guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act 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 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 Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People were supported by staff who knew the principles of The Mental Capacity Act 2005,
- Staff ensured that the person was involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in their best interests.
- Where people did not have capacity to make decisions, they were supported to have maximum choice and control of their lives.
- Where required appropriate applications had been made to deprive people of the liberty within the law.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- The person received care from staff who developed positive, caring and compassionate relationships with them.
- Staff spent time to get to know the person's preferences and used this knowledge to care for them in the way they liked.
- Where people were unable to express their needs and choices, staff understood their way of communicating. Staff observed body language, eye contact and simple sign language to interpret what people needed.
- The person was treated with kindness and were positive about the staff's caring attitude.

Supporting people to express their views and be involved in making decisions about their care

- The person was involved in day to day decisions and in regular reviews of their care. Relatives confirmed staff involved them when the person needed help and support with decision making. Where needed, they sought external professional help to support decision making for people such as advocacy.
- The person needed aids to help them communicate effectively. This was recognised and supported, for example using pictorial aids rather than written material.

Respecting and promoting people's privacy, dignity and independence

- Staff showed genuine concern for the person and ensured their rights were upheld.
- The provider recognised people's diversity, they had policies in place that highlighted the importance of treating everyone as individuals. People's diverse needs, such as their cultural or religious needs were reflected in their care planning.
- The person was supported to maintain and develop relationships with those close to them, social networks and the community.
- The person's right to privacy and confidentiality was respected.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

Personalised care.

- Care plans were personalised to the individual and recorded details about the person's specific needs and how they liked to be supported.
- The person was empowered to have as much control and independence as possible, including in developing care, support and treatment plans. Relatives were also involved where they chose to be and where people wanted that.
- Daily notes were completed which gave an overview of the care the person had received and captured any changes in their health and well-being.
- People's needs were identified, including those related to protected equality characteristics, and their choices and preferences were regularly met and reviewed. For example, reasonable adjustments were made where appropriate; and the service identified, recorded, shared and met the information and communication needs of people with a disability or sensory loss, as required by the Accessible Information Standard. All relevant policies were available in easy read to enable people to understand their rights and how to raise concerns.
- Staff supported the person to develop and maintain friendships and relationships with relatives.
- The person had access to the community with staff support. They accessed local clubs and venues based on their preferences.
- Activities in the service were not formally organised. Discussions with the person were held daily with staff about how they wished to spend their time.

Improving care quality in response to complaints or concerns

- People and relatives knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this.
- Relatives knew how to make complaints; and felt they would be listened to and acted upon in an open and transparent way, as an opportunity to improve the service.
- Complaints had been dealt with in a timely and effective way. Other concerns were dealt with before they became complaints.

End of life care and support

- The registered manager informed us no one was receiving end of life care at the time of our inspection.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

Good - The service was consistently managed and well led. Leaders and the culture they created promoted high quality, person centred care.

Planning and promoting person-centred, high-quality care and support, and understands and acts on duty of candour responsibility.

- Thornbury is owned by Green Light PBS Limited who run a number of services within Cornwall. There is a clearly defined management structure and regular oversight and input from senior management.
- Staff expressed confidence in the management team. The ethos of the service was 'empowering people to lead a lifestyle they are proud of.'
- The Registered Manager, Operations Manager and Behavioural Analyst all spoke with us about the person they supported and demonstrated a good understanding of their needs, likes and preferences.
- Staff told us they had confidence in the management of the service and would not hesitate to report any concerns.
- When concerns had been raised senior staff had addressed these with the people concerned and responded in a timely manner.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager, was very much involved in the day to day running of the service including working hands on, alongside staff where required. They positively encouraged feedback and were keen to grow their service whilst ensuring people received "the best care".
- Staff strived to ensure care was delivered in the way the person needed and wanted it.
- There was a good communication maintained between the registered manager, director and staff.
- Staff felt respected, valued and supported and that they were fairly treated
- Regular checks were completed by the staff, registered manager and provider to make sure people were safe and that they were happy with the service they received.
- The registered manager had ensured they had communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.

Engaging and involving people using the service, the public and staff

- Leaders and managers demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service, staff and stakeholders.
- There was an open culture where staff were encouraged to make suggestions about how improvements could be made to the quality of care and support offered to people.
- Staff reported positively about working for the service and did not identify any areas for improvement.
- People and staff were encouraged to air their views and concerns.

- The service worked in partnership and collaboration with other key organisations to support care provision, joined-up care and service development.
- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care and to aid service development.
- The provider held monthly meetings for their registered managers to share and develop good practice in their services.

Continuous learning and improving care

- The director and registered manager were keen to ensure a culture of continuous learning and improvement.
- The management team completed regular in-house audits of all aspects of the service.