

The Stable Family Home Trust

Stables Flat

Inspection report

The Stable Family Home Trust
The Stables, Bisterne
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19 April 2016

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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 unannounced comprehensive inspection took place on 15 and 19 April 2016.

Stables Flat is a care home registered to accommodate a maximum of eight people with learning disabilities. At the time of the inspection eight people were living at the home.

There was a registered manager employed at the home. 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 feedback we received from people and their relatives was that Stables Flat was a, "Really good" place to live. People told us they, "Enjoyed" living there and all the relatives we spoke with gave positive views about the home and the care and support their relative was given.

People told us they felt safe and well supported at the home. Staff had been trained in safeguarding adults and were aware of the types of abuse and how to identify, prevent and report abuse. There was an effective system of training in place for staff.

Plans were in place on how to support people in the event of an emergency.

Staff were friendly, kind and caring and gave individual, person centred care to everyone living at Stables Flat. There were robust recruitment practises in place to make sure that appropriate staff were employed to support people.

People's needs were assessed and areas of risk were assessed and reviewed to ensure peoples' safety. Support was offered in accordance with people's wishes and their privacy was protected. Staff knew people well and understood their physical and personal care needs and treated them with dignity and respect.

Staff and people told us they felt the staffing levels were appropriate to meet people's needs. Staffing levels were planned and adjusted to make sure people were given individualised care.

People's medicines were securely stored and managed and people were supported to take their prescribed medicines in a timely way.

Staff were knowledgeable about the Mental Capacity Act 2005 and its principles and had a thorough understanding around how people living at Stables flat wanted their care and support to be given.

People were provided with a choice of healthy food and drink ensuring their nutritional needs were met. Systems were in place to support people with budgeting, shopping and cooking. People's health needs were

monitored which included appropriate referrals to health professionals when required.

People were supported to take part in a wide range of activities, hobbies and work placements to maintain their independence and promote a healthy lifestyle. People could choose where they spent their time.

People told us they were happy to raise any issues or concerns with the manager and felt confident they would be listened to. Complaint forms were available in the home in an easy read format for people to use if they wanted to express a concern.

The service was well led with a clear management structure and an open, friendly culture. There were systems in place to promote a continuous drive for improvement.

The provider was developing a quality assurance system to monitor and improve the quality of the service 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?

Good ●

The service was safe. Staff knew how to recognise and respond to abuse correctly. They understood the procedures in place to safeguard people from abuse.

Risks were assessed and steps taken to make sure people were supported safely.

There were robust recruitment systems in place and appropriate numbers of staff employed to meet people's needs.

Medicines were managed safely, stored securely and records completed accurately.

Is the service effective?

Good ●

The service was effective. Staff were well trained and knowledgeable about people and received ongoing support from senior staff who had the appropriate knowledge and skills.

People were fully consulted and gave consent regarding how they were supported and cared for.

People's nutritional needs were met. Menu's offered variety and choice and provided a balanced, healthy diet for people. People were offered choice and appropriate support in budgeting, shopping and cooking to make sure they stayed healthy.

People accessed the services of healthcare professionals as appropriate.

Is the service caring?

Good ●

The service was caring. Care was provided with kindness and compassion by staff who treated people with respect and dignity.

Staff had developed good relationships with people and there was a happy relaxed atmosphere.

Wherever possible, people were involved in making decisions about their care and staff took account of their individual needs

and preferences.

People and told us that staff were kind, caring and supportive.

Is the service responsive?

Good ●

The service was responsive. People's needs were assessed and care was planned and delivered to meet their needs.

People's support plans and records were kept up to date and reflected people's preferences and choices.

People were encouraged to take part in the domestic running of the home as well as taking part in a varied schedule of activities that were meaningful to them.

People knew how to raise a concern and felt confident that these would be addressed promptly.

Is the service well-led?

Good ●

The service was well led.

Staff felt well supported by an open and accessible management team, felt comfortable to raise concerns if needed and confident they would be listened to.

Observations and feedback from people and staff showed us the service had a friendly, supportive, person-centred culture.

The provider had a range of audits in place to monitor the quality of the service provided and kept up to date with changes in practice.

Stables Flat

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 comprehensive inspection took place on 15 and 19 April 2016 and was unannounced. One CQC inspector visited the home on both days. At this inspection we found the provider was meeting the regulations.

Before the inspection we reviewed the information we held about the service. This included information about incidents the provider had notified us of. We also asked the local authority who commission the service for their views on the care and service given by the home.

During the two day inspection we met the majority of the people living there and spoke with four of them. We spoke with the manager and two support workers, one of whom was a team leader. Following the inspection visits we spoke with three people's relatives.

We observed how people were supported in communal areas and looked at three people's care, treatment and support records. We also looked at records relating to the management of the service including staffing rota's, staff recruitment and training records, policies, premises maintenance records, staff meeting minutes, quality monitoring reports and medicine administration records (MARs).

Is the service safe?

Our findings

We spoke with four people who lived at Stable Flat and asked them if they felt safe living there. Each person told us they felt safe and they enjoyed living at Stables Flat. One person said, "I'm very happy here".

Following the inspection visit we spoke with three relatives who all told us they were happy with the care and support given to their relative at Stables flat. One relatives said, "I can't fault it, it's totally safe, the staff are excellent". And another family member told us, "It is fabulous, the staff are so committed to provide the best care for people...we are so pleased, staff are always the same which is so good and means the continuity of care is very good".

Staff had received training in safeguarding adults during their induction and refresher training was provided when required. We saw certificates and records to confirm this training had been completed. Staff spoke knowledgeably about the different types of abuse and were aware of the procedures that they should follow if they had any safeguarding concerns. The service has not had any safeguarding concerns raised since the last inspection in November 2013.

There was a system in place for dealing with emergencies such as a fire or having to evacuate the premises in an unforeseen emergency. There were processes in place to ensure the premises were maintained safely. Regular checks were completed for a range of topics such as: fire safety equipment and fire panels, electrical testing, lighting systems and gas safety.

There were robust recruitment policies and procedures in place that were being followed. We looked at the recruitment files for three members of staff and found that the relevant checks had been completed before staff started working at Stables Flat. These included up to date criminal record checks, fitness to work questionnaires, proof of identity and right to work in the United Kingdom and references from appropriate sources, such as current or most recent employers. Staff had filled in application forms to demonstrate that they had relevant skills and experience. This made sure that people were protected as far as possible from individuals who were known to be unsuitable to work in the care industry. The manager told us that there were disciplinary procedures in place however; they had not had to use them.

Through our observations and discussions with people, staff and relatives we found there were enough staff with the right experience or training to meet the needs of people. The manager told us they assessed their staffing requirements on a daily basis depending on people's needs and occupancy levels of the home each day, staffing levels were then adjusted accordingly. The manager said they had a selection of 'bank' staff they could call on if they were short staffed due to annual leave or if staff were needed to accompany people to hospital or community events. The same bank staff were used on a regular basis to ensure people living in the home received continuity of care by people they knew. We saw the staff rota's for the week of our inspection visit which correctly reflected the levels of staff on duty during our visit.

Each person had detailed risk assessments completed to cover a wide range of activities and health and safety issues, such as a risk of scalding from making hot drinks and a risk of choking. The risk assessments

were clear and outlined what people could do on their own and when they required assistance and support. This helped ensure people were supported to take responsible risks as part of their daily lifestyles with the minimum restrictions.

People were supported to maintain their independence and make their own daily choices such as budgeting for their shopping and arranging their transport for their trips into town. Risk assessments and support plans explained how someone may become anxious or stressed and how staff should respond. Staff had been given training on supporting people in these situations. This meant people were protected against the risk of harm because the provider had suitable arrangements in place.

We looked at how people's medicines were managed and checked the storage and stock of medicines. A monitored dosage system was used in the home and the system contained a photo of the person to aid identification. Staff told us they found the monitored dosage system safe and easy to use. Medicines were stored securely and administered correctly. We reviewed each person's Medication Administration Record (MAR's). We saw there was a photograph at the front of each person's records to assist staff in correctly identifying people. The records showed people had been administered their medicines as prescribed by their GP.

The provider had a medicine fridge that was used to store people's medicine within a specific temperature range. Some medicines need to be stored within a specific temperature to make sure they remain effective. There was a system in place to ensure the fridge temperatures were recorded daily and clear guidance was available for staff to follow, should the fridge start to operate outside of the required temperatures.

People had their allergies recorded and guidance on the use of 'as required' (PRN) medicines. The provider had a system of 'PRN' information sheets and a clear 'PRN' policy was available which gave staff clear guidance.

The manager told us all staff who had responsibility for administering medication had received medication training to ensure they could administer medicines safely. We saw certificates that confirmed this.

Is the service effective?

Our findings

Following our inspection visit we spoke to two relatives of people living at Stables Flat. Relatives spoke very positively of the support and care given by the staff at Stables Flat. One relative said, "The service is fabulous, I can't fault anything at all, the staff know everyone so well and they have a very stable staff team so the continuity of care is excellent, I have total peace of mind". Another relative said, "The staff and location is excellent, they are very good at keeping me involved and I feel like part of the family when I visit, it's just like home, very friendly, a lovely atmosphere". Relatives told us they found the service promoted people's independence and maintained a high level of person centred care. One commented, "I can't fault them, the staff go over and above in the care and support they provide".

We reviewed three staff recruitment records, one of which had been recently recruited and spoke with two members of staff about their recruitment and induction. Staff told us they had felt well supported throughout their induction period and had got to know the people living at the home well before they supported them independently. Staff had a good understanding of their role of providing person centred care and support to people and told us they were given opportunities to develop in their role. Staff said there was always someone they could go to if they needed further advice and support.

People were supported by staff who were trained to deliver care and support safely and to an appropriate standard. The manager told us all new staff completed an induction training programme which led to the care certificate, which is a nationally recognised induction qualification. We saw the providers training schedule which showed staff completed core training such as, moving and handling, safeguarding, mental capacity and decision making, infection control, food safety and first aid. Records showed staff had been training in safe medication administration and had their competency assessed on a regular basis. The training schedule showed staff were scheduled to take part in refresher training in a range of subjects when required.

There was a clear programme of supervision in place. The manager explained that there was an action plan in place to look at the way staff appraisals were conducted. They confirmed appraisals would be completed on all staff in the near future. We reviewed a selection of staff supervision reviews. These were regularly completed and were detailed and thorough, with staff given the opportunity to raise ideas, concerns or development requests on a face to face basis. Staff told us they valued the support and guidance given to them by their manager and colleagues and said they got on well as a team.

Staff told us and records showed they had been trained in the Mental Capacity Act (MCA) 2005. Staff demonstrated they had a good understanding about people's mental capacity and were knowledgeable about the circumstances when making decisions that were in a person's best interests should apply. People told us and records showed that they were consulted about matters relating to their care. Records showed staff had asked people for their consent and where possible people had signed their care plans. People and their relatives told us they were involved in discussions about their care, support and any associated risks. Records showed individual choices and decisions were documented in people's support plans, which showed the person at the centre of the decision had been supported in the decision making process.

The manager was aware of their responsibilities in regard to the Deprivation of Liberty Safeguards (DoLS). These safeguards aim to protect people living in care homes and hospitals from being inappropriately deprived of their liberty. These safeguards can only be used when there is no other way of supporting a person safely. The responsibility for applying to authorise a deprivation of liberty rested with the manager. The manager told us one person living at Stables Flat had a DoLS in place. We reviewed this DoLS which was being correctly adhered to.

Staff supported people to prepare and cook their meals and snacks. People's dietary needs were assessed with people's likes, dislikes and allergies recorded in their support plan. People could choose what they wanted for their meals and could prepare meal themselves or ask for support from the staff. People were monitored on a weekly basis for any unexplained weight loss or gain.

Where it was possible, people were supported and encouraged to do their own shopping and make their menu decisions for the week. Weekly menus were displayed in the kitchen in a pictorial format so people could see what meals were planned. People could help with the preparation and cooking of the meal if they wanted to. People bought their own choice of snacks, and healthy snacks such as fruit and yoghurt were readily available throughout the home.

Staff told us kitchen equipment and fittings were well maintained and there was a daily, weekly and monthly cleaning rota for the kitchen and its equipment.

Records showed the provider involved other health professionals where appropriate and in a timely manner, for example, GPs, chiropodists and dentists. People were either supported to visit the health professionals or some, such as the chiropodist, visited the home on a regular basis and got to know the people well. Staff spoke knowledgeably about each person's health needs and demonstrated a good awareness of how to manage people's individual health needs.

People's rooms were personalised with their own bed linen, posters and personal possessions. Some bedrooms had en-suite facilities. Throughout the home posters and guidance information was displayed in an "easy read" pictorial format, this ensured people living at the home could put their views across and feel involved in the running of the home.

Is the service caring?

Our findings

Every person we spoke to told us they enjoyed living at Stables Flat. When we asked one person why, they told us, "I like everyone here". People told us they really liked the staff and enjoyed being able to have a joke and chat with them.

Staff treated people with respect, listening to them and offering support in a friendly and caring way. Staff knew people well and spent time chatting to them and interacting in a positive and respectful manner. Staff spoke clearly when speaking with people and care was taken not to overload the person with too much information at one time.

People responded well to staff and actively sought them out to talk to; this demonstrated people were relaxed and comfortable with staff. Staff supported people patiently and kindly and did not appear rushed.

We saw people were able to express their views and were involved in making decisions about their care and support to promote their choices and independence. We saw people had signed their support plans and care records to show they had been involved in making their own choices and decisions regarding what they wanted to do and how they wanted their support to be given. During our inspection visit all of the people spent time away from the home, taking part in a large range of activities that they enjoyed such as craft work, pottery, working in the providers shop, shopping or their work placement or day centre.

People's privacy was respected. Staff asked permission before entering people's bedroom. There were communal areas within the home where people could spend time together, watching television or listening to music.

Staff spoke respectfully about people and demonstrated a good understanding of how to maintain people's dignity. For example, respecting people's wishes to dress themselves but ensuring they were available should they need support with choosing their clothes. Personal care needs were discussed discreetly and people were supported with their personal care in private.

Computers and internet access was provided in the home and staff were able to support people to use the internet and access their personal correspondence. One person showed us their computer tablet which they used and people could access and use social media and the internet when they wished.

Is the service responsive?

Our findings

People and their relatives told us they were very happy with the level and service of care and support they received. One relative said, "The staff have been marvellous, I feel they go over and above to make sure people get the right support and help... I really can't praise them enough".

People's care and support needs had been assessed before they moved into Stables Flat. This meant the provider was able to meet the needs of people they were planning to admit to the home. This information was then used to complete a more detailed support plan which provided staff with the information to deliver appropriate care.

Assessments were completed for all people and covered areas including; medicines, weight and mobility requirements. The assessments showed the person and their relatives had been included and involved in the process wherever possible.

People received care that was personalised and responsive to their needs. People were allocated a member of staff, known as a keyworker, who worked with them to ensure their preferences and wishes were identified and that they were kept involved in their on-going care and support. The manager told us although people had keyworkers, all the people knew they could speak to any member of staff at any time, they did not have to wait for their keyworker if they were not available. People told us this was the case and we observed people were happy to approach any members of staff if they wanted support or assistance.

Staff commented they all worked well as a team. One member of staff said, "It's really good here, we are open with each other and always discuss ideas with each other...that works really well".

Staff demonstrated a thorough knowledge and understanding of people's care, support needs and routines and could describe how each person preferred their care to be delivered. Support plans were reviewed annually or sooner to reflect any changes in people's care. Support plans were well written and person centred and contained guidance for staff about the way each person preferred to be supported and cared for. They highlighted what people liked to do for themselves and when they may need assistance from staff. People had signed their support plans which showed they had been involved in the process.

The manager showed us the pendant alarm system that was available for people to use if they were spending any time alone in the flat. People had specific goals around spending time alone and the pendant system was an effective tool in enabling them to achieve this goal in a safe way. The manager said it gave people the confidence to know they could summon support straight away if they needed it. Staff were only downstairs in the day centre which meant they could be with the person very quickly once the pendant alarm was activated.

People's weight was recorded weekly and records showed they were referred to health professionals such as the dietician or the speech and language therapy team when required. There were body maps in place to record any bruising or injuries sustained by a person.

People were supported in promoting their own independence and community involvement. The provider supported people to take part in a varied and wide range of activities which included accessing the local community. Activities played a very important part in people's lives and people were supported to access a very wide range of activities which included; trips to attractions such as The Dr Who experience, Fleet Air Museum, Ringwood Brewery tour, helicopter trips as well as attending the community day centre, working in the charity shop and making arts and crafts.

People spoke very positively about their activities and told us they enjoyed their activities immensely.

We saw there was a pictorial 'Making Things Better' complaint form available in the home for people to complete if they were unhappy with any aspect of living at the home. The form went through the stages of a complaint ranging from what the concern was to what action would happen, who would take action and by what date the action would be completed. There was a section for people to complete asking them if they were happy with the action taken and if there were any further changes required. The manager told us people were given support to make a complaint where they needed assistance.

The manager confirmed the service had not received any formal complaints since the last inspection that was completed in November 2013. We saw a written complaint policy that was clearly written and covered all areas of dealing with possible complaints from investigation, information, responding and improvements. Relatives we spoke to told us they knew how to complain if they needed to and felt confident their concern would be listened to and acted upon.

People were supported to maintain relationships with their family. Relatives we spoke with confirmed they were kept fully informed and up to date on their family member's progress and were welcome to visit the home whenever they wished.

Is the service well-led?

Our findings

People, relatives and staff expressed confidence in the homes management. Staff spoke of the, "Person centred approach" and, "Open, friendly, supportive culture" of the service. Our observations during our inspection showed the service was inclusive and promoted an independent, positive approach to people and their needs. One member of staff told us, "I feel really well supported, the management team are always available and I feel listened to and appreciated...I feel privileged to work here".

The provider undertook regular visits to monitor the quality of the service. We saw records of the last quality monitoring visit that had been conducted on the service. The visit and report were detailed and covered all of the areas that a Care Quality Commission inspection would cover.

There was a new system for reviewing the quality of the service provided to people. We saw the questionnaires that were to be used for seeking people's thoughts and feedback on the service provided. These were clearly written and incorporated an effective pictorial format which enabled people to express their views. Once completed the questionnaires would be used to ensure a continuous quality review of the service.

Staff we spoke with told us they knew there were policies and procedures about raising concerns, and said they were comfortable to raise any issues they had. Staff were aware of the whistle blowing procedures should they wish to raise any concerns about the service. There was a culture of openness in the home, which enabled staff to question practice and suggest new ideas if they wished.

Records showed regular staff meetings were held and detailed minutes were completed so that everyone could see who had been present, what had been discussed and what actions agreed. Staff told us communication within the home was good and relatives commented they were always kept involved and had a good understanding about the service that was provided. We saw that people's needs and information about people's care and support was discussed at staff handover meeting, at the end of each shift to ensure people got continuity of care throughout the day.

Accidents and incidents were recorded and there was a clear system in place to review and analyse accidents and incidents to see if any patterns or trends were emerging. Records showed audits had been completed on a range of topics to ensure people's care needs were met. These audits included; support plan reviews, medication, infection control, health and safety and a range of environmental premises checks such as, gas, portable appliance testing, fire systems and furniture, doors and window checks. We saw evidence which showed that any actions resulting from the audit were acted upon in a timely way.

We observed staff gave time for people to make decisions and respond to questions. The manager told us about the homes monthly resident meetings that gave people the opportunity to contribute and feel involved with the running of the home. These meetings were called 'Our Voice, Our Say' meetings and allowed people to discuss topics and ideas as well as any items of concern or improvements.

The manager produced an update newsletter which covered all aspects of living in Stables Flat. The newsletter gave a good update regarding the changes in staffing, interests and opportunities, volunteer projects and health issues as well as highlighting specific events in people's lives such as Birthdays and any awards achieved.