

Voyage 1 Limited

The Mews

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Mews provides accommodation personal care for up to four people with a learning disability. The home is a purpose built bungalow situated on the outskirts of Blyth, Northumberland. Accommodation is provided in four single rooms. Shared space includes a dining kitchen, living room and sensory room. At the time of the inspection, there were four people living in the home.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service and what we found

People were comfortable and safe living in the home. The registered manager and staff understood their responsibilities to raise concerns and report incidents or allegations of abuse. There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. The provider operated an effective recruitment procedure to ensure prospective staff were suitable to work for the service. The registered manager and staff carried out risk assessments to enable people to retain their independence and receive care with minimum risk to themselves or others. People were protected from the risks associated with the spread of infection. People received their medicines safely. The provider had arrangements in place for the maintenance and upkeep of the building.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the home supported this practice. People's needs were assessed at regular intervals. The provider had appropriate arrangements to ensure staff received training relevant to their role. New staff completed an induction training programme. Staff felt supported by the registered manager.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

Staff treated people with kindness, dignity and respect and spent time getting to know them and their specific needs and wishes. Staff spoke with people in a friendly manner. Wherever possible, people and their families were involved in the development and review of their care plans. This meant staff had up to date information about people's needs and wishes. People were supported and encouraged to participate in a range of activities and were supported to have holidays away from the home. People had access to a clear complaint's procedure.

The registered manager carried out a number of audits to check the quality of the service. The registered manager provided leadership and took into account the views of people, their relatives, staff and visiting professional staff about the quality of care provided. The registered manager and staff used the feedback to make improvements to the service.

Rating at last inspection

The last rating for this service was good (published 21 June 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

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

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The Mews

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

The Mews is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during 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:

We gave the service 24 hours' notice of the inspection. This was because the service is small, and people are often out. We wanted to be sure there would be people at home to speak with us and the registered manager or staff were available.

What we did before the inspection

Before the inspection, the provider completed a Provider Information Return. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This information helps support our inspections.

We reviewed other information we held about the service such as notifications. These are events that happen in the service that the provider is required to tell us about. We also sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and

represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spent time and spoke with the four people living in the home. We also spoke with two members of staff, two relatives and the registered manager as well as the operations manager over the telephone. We looked at the care records of two people who used the service and looked around the premises. We observed staff interaction with people. We reviewed a range of records. This included four people's medication records, one staff file in relation to recruitment and staff supervision. We also reviewed a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek feedback from the provider to validate evidence found. The registered manager and operations manager sent us additional information relevant to the inspection.

Is the service safe?

Our findings

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

At the last inspection, this key question was rated as good. At this inspection, this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had taken suitable steps to ensure staff knew how to keep people safe and protect them from harm and discrimination. This included access to appropriate policies and procedures. A people told us they felt safe living in the home and relatives had no concerns about the safety of their family member. A relative told us, "We feel our [family member] is very safe. They have all the right equipment and staff are well trained."
- The registered manager and staff understood safeguarding matters and were clear about when to report incidents and safeguarding concerns to other agencies. All staff had received training in safeguarding vulnerable adults and refreshed their knowledge and skills on a regular basis.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people and the service were assessed and managed. This helped to protect people's safety and rights to freedom and independence. Risk management strategies were integrated into people's care plans and there was clear guidance for staff to follow to support people safely.
- The registered manager had carried out environmental risk assessments to ensure the safety of people's living space. The premises were well maintained. The provider had arrangements to carry out maintenance and safety checks on the installations and equipment. All safety certificates were complete and up to date.
- The provider had a disaster contingency plan which described how people would continue to receive a service in the event of adverse circumstances, such as bad weather.
- The registered manager had developed systems to learn lessons and improve the service when things went wrong. We saw there were appropriate systems to record and manage any accidents and incidents. The registered manager had carried out investigations as necessary following any incidents and had discussed the learning with the staff team.

Staffing and recruitment

- The provider had suitable staffing arrangements to meet the assessed needs of people in a person-centred and timely way. We observed staff going out on activities and spending time with people during the inspection.
- The registered manager and staff adopted a flexible approach to ensure people's needs were met. This included supporting them away on holidays, appointments and social events.
- The provider followed safe recruitment systems and processes to protect people from the employment of unsuitable staff. We looked at one staff recruitment file and found appropriate checks were carried out prior to employment.
- People were supported by a stable staff team. The registered manager told us, "The turnover of staff is

minimal, and they have good sound knowledge of the people we support. They are very supportive towards the people we support, families and team members."

Using medicines safely

- Staff followed safe processes for the management of people's medicines and had access to a full set of medicines policies and procedures. Staff had completed appropriate training, which was refreshed at regular intervals. There were written protocols to guide staff on the administration of medicines prescribed 'as and when required'.
- Staff completed the medicines records accurately and regular checks were made of the balance of stocks. Two staff were involved in the administration of people's medicines, to reduce the risk of error.

Preventing and controlling infection

- The provider had systems to help prevent the spread of infection and to protect people against the risk of infection. Staff had received training in this area and were provided with appropriate protective clothing, such as disposable gloves and aprons.
- The registered manager conducted infection control audits and checked the service was clean and tidy. We saw all areas of the home had a good standard of cleanliness.
- People's laundry was washed and dried in a hygienic manner. The laundry room was clean and in good order.

Is the service effective?

Our findings

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

At the last inspection, this key question was rated as good. At this inspection, this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law 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 Act requires 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 when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager and staff had completed training and demonstrated an understanding of the principles of the MCA. Staff made sure people were supported to have maximum choice and control of their lives and supported them in the least restrictive way possible. Best interest meetings had been held to ensure people's rights were protected.
- At the time of the inspection, the registered manager had submitted two applications for a DoLS authorisation to the local authority for consideration. One person had an authorised DoLS. The registered manager confirmed there were no conditions attached to the authorised DoLS.

Supporting people to eat and drink enough to maintain a balanced diet

- The registered manager ensured people received a well-balanced diet, which met their needs and dietary preferences.
- We observed staff and people sat round the kitchen table eating their meals together. This meant the mealtime was a pleasant social occasion.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required. We saw staff adhered to guidance given by Speech and Language Therapists and had ready access to people's eating and drinking plans.

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

- The design and decoration of the service met people's needs. People's bedrooms were personalised and

decorated with items meaningful to them. The communal areas were accessible and there was outside space for people to spend time outdoors if they chose.

- The operations manager confirmed new flooring was due to be fitted in communal areas within the next six weeks.
- Appropriate adaptations had been made to the property to ensure people's needs were met and they were able to move freely around the home. One room had been fitted with sensory equipment to help provide stimulation and promote relaxation. We observed a person enjoyed using the room, during the inspection.

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

- The registered manager and staff assessed people's needs every six months to ensure they received appropriate care and support.
- The provider had comprehensive systems to assess people's needs before they moved into the service, which included transition planning. However, there had been no new admissions to the service since the last inspection.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- The registered manager and staff made sure people received appropriate support to meet their healthcare needs. People's physical and mental healthcare needs were documented within their care plan and health action plans. This helped staff to recognise any signs of deteriorating health. Staff had also completed hospital passports, which were designed to help medical staff understand people's needs and preferences.
- Whilst there were no specific oral healthcare plans, we saw people's oral care was monitored and recorded on a daily basis. Relatives told us they had recently supported their family member on a dental appointment and the dentist had commended the service. The relative said, "The dentist was very impressed with the state of [family member's] oral health and said their oral hygiene was excellent."
- Staff worked closely with other social care and healthcare professionals as well as other organisations to ensure people received a coordinated service. They shared appropriate information when people used other services. In this way, people's needs were known, and care was provided consistently.

Staff support: induction, training, skills and experience

- Staff were provided with appropriate support and training. New staff were supported through an induction programme and the provider's mandatory training was provided for all staff members. This helped to ensure the workforce was kept up to date with current legislation and good practice guidance. The registered manager monitored staff training to ensure staff completed the training in a timely manner.
- Staff were provided with one to one supervision and an annual appraisal. These forums facilitated discussions around work performance, training needs and areas of good practice. Staff demonstrated a good awareness of their working roles and responsibilities and confirmed their training was on-going and relevant.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection, this key question was rated as good. At this inspection, this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff promoted people's rights and delivered person-centred care. We observed staff were kind and caring with people and responsive to their needs. Staff supported people in a patient, warm and friendly manner.
- Staff and people had developed positive and supportive relationships. People and staff had a shared sense of humour; the atmosphere of the home was welcoming and engaging.
- The registered manager and staff spoke about people in ways which demonstrated they cared for them on an individual level and enjoyed their company and personalities. The registered manager told us, "We believe that every person has the right to enjoy what life has to offer them, often hurdles are present but together we find a way to overcome these."
- The registered manager promoted and encouraged inclusion. People's equality, diversity and human rights were respected and recorded as part of the care planning process. Staff had received training on equality and diversity issues and had access to a set of policies and procedures.

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

- Staff involved people in decisions and consulted them wherever possible in individual and meaningful ways. People had regular meetings with their keyworker and were involved wherever appropriate in the development and review of their care plan.
- People were encouraged to make choices about their day to day routines, in line with their personal preferences and were encouraged to express their views. Staff were committed to ensuring the best possible outcomes were achieved. They spent time with people to understand their preferred methods of communication, including non-verbal communication.
- People were provided with appropriate information about the service. The information included details about what people could expect from the service and how they could access other organisations and networks. Staff explained the information to people, as appropriate.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff respected and promoted people's privacy and dignity. People spent time alone in their rooms if they wished and had time after the lunch relaxing in their bedrooms.
- We observed staff knocking on people's bedroom doors before entering and giving people privacy. Where remote monitoring methods were used these were thoroughly assessed and only used discreetly in order to protect people's right to privacy.
- Staff encouraged people to develop their independence and self-esteem to enable them to make choices and express their preferences. Staff focused on what people could do and helped them to achieve positive

outcomes. People's care plans highlighted what they could do for themselves and how staff should assist with this.

- Staff understood their responsibilities for keeping people's personal information confidential. People's information was stored and held in line with the provider's confidentiality policy and with recent changes in government regulations.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection, this key question was rated as good. At this inspection, this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received person-centred care and support in a way that was flexible and responsive to their needs. We saw people's care plans contained information about preferred routines for staff to follow to ensure people had the personalised support they needed.
- The care plans were detailed and showed people's preferences and interests had been taken into consideration. The registered manager and staff regularly reviewed the plans with people where possible, and their relatives to ensure they remained current and up to date.
- Relatives told us the registered manager and staff had a good understanding of their family member's needs, preferences and wishes. One relative said, "The staff are very caring, lovely people and have an excellent relationship with [family member]."
- Staff maintained daily records of care and completed appropriate monitoring charts. These provided information about changing needs and any recurring difficulties. We noted people's needs were described in respectful and sensitive terms.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to take part in a wide range of activities to provide them with stimulation, entertainment, socialisation and ensure they were part of the local community. The registered manager told us, "I feel we support the individuals that live here to lead full filling lives, that we keep them safe and are responsive to their changing needs."
- The registered manager and staff supported people flexibly to ensure they had access to activities which interested them. We saw there was an activity planner displayed on a board in the office and there were opportunity guidelines included in people's care plans.
- People were supported to spend time away from the home on short breaks and holidays. We saw many photographs of people enjoying activities and holidays. A relative told us, "The staff are very amenable. Our [family member] goes out and about regularly. They have been away for a few days and they are planning a further holiday in Edinburgh."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's information and communication needs had been identified and met. We saw staff members

openly engaging with people during the inspection, which enabled conversation and helped to avoid isolation.

- The provider was aware of their responsibility to meet the AIS. They provided people with information regarding the service in different formats where necessary, to meet people's diverse needs.

End of life care and support

- At the time of the inspection no one was receiving end of life care. The registered manager informed us that if required they would work closely with people, their relatives and other professionals. The registered manager agreed to explore, and record people's end of life wishes, as appropriate.

Improving care quality in response to complaints or concerns

- Relatives were confident any complaints they made would be listened to and acted upon in an open and transparent way. One relative told us, "[Registered manager] sets high standards and she always sorts out any problems straightaway."
- The provider had 'See something, Say something' cards, which people could complete and send to head office if they didn't wish to raise issues in the home.
- The provider had policies and procedures for dealing with any complaints. The registered manager had not received any complaints since the last inspection. However, one person made some comments during the inspection. The registered manager took immediate action and reassured the person. The operations manager agreed to investigate the person's contractual arrangements.

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 the last inspection, this key question was rated as good. At this inspection, this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and staff had a clear understanding of their roles and contributions to service delivery. Staff morale was good, and they felt valued and supported.
- The registered manager had established systems to monitor the quality of the service. They undertook audits and had drawn up action plans to address any shortfalls. The registered manager transferred the actions to a consolidated action plan and reviewed the plan to ensure appropriate action had been taken.
- People, relatives and staff spoke positively about the way the service was managed and the registered manager's leadership style. A person told us, "[Registered manager] is fun" and a relative commented, "[Registered manager] keeps us well informed. She is very friendly and organised. We can't fault the way the home is run and hope she never leaves."
- The registered manager utilised the quality assurance systems and staff meetings to ensure continuous learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns within the meetings and the registered manager was open to feedback.

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 registered manager understood and acted on their duty of candour responsibilities. They promoted and encouraged candour through openness. Relatives told us the registered manager and staff were open and honest. Good relationships had been developed between the registered manager, staff and people living in the home.
- The registered manager told us she spoke with people when things went wrong and apologised where necessary. Any incidents were fully discussed with staff during meetings or in one to one support sessions.
- The registered manager was aware of the need to notify CQC or other agencies of any untoward incidents or events within the service. Incidents that had occurred had been managed correctly in consultation with other agencies whenever this was necessary.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider, registered manager and staff promoted the provision of high-quality, person-centred care. We observed a positive and welcoming culture within the home. Staff told us they felt everyone was well supported and they all told us how much they enjoyed their work.
- The registered manager knew the people who lived in the home well and was knowledgeable about their

needs and preferences. She explained she often worked alongside staff providing people with care and support. This meant she had a good understanding of the complexity of people's needs and the pressures placed on staff. The registered manager told us she was proud of the staff team and their commitment to strong teamwork.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager engaged people, relatives, staff and visiting professionals in the development of the service. She carried out an annual service review, which involved the distribution of satisfaction questionnaires. The last review was undertaken in October 2018. We looked at a sample of the returned questionnaires and noted all respondents were satisfied with the service. People had also provided positive feedback about the service. For instance, one relative had written, "The Mews is an excellent environment. Safe and friendly. The staff do a wonderful job." And visiting professional had commented, "Superb personalised care. There is continuity of care with a low staff turnover. It is a pleasure visiting The Mews."
- Staff involved people in the service wherever possible and gave consideration to their equality characteristics. The registered manager encouraged people to express their views via daily conversations, care plan reviews and regular meetings, including monthly meetings with their keyworker.
- The registered manager and staff worked in partnership with external agencies to learn and share knowledge that promoted continued service development.