

Autonomy Healthcare Limited

Autonomy: Victoria & Elizabeth

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Autonomy: Victoria & Elizabeth accommodates up to nine people across two adapted buildings, the buildings contain spacious apartments. At the time of our inspection there were seven people using the service. The service specialises in the care of people diagnosed with learning disabilities, autistic spectrum disorders, and mental health needs.

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

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

Right Support

Staff supported people with their medicines in a way which promoted their independence and achieved the best possible health outcome. Medicines were managed safely.

People had a choice about their living environment and were able to personalise their rooms. People's rooms were very personalised, and people were able to decorate their room to reflect their interests and hobbies.

Staff enabled people to access specialist health and social care support in the community and people were supported to play an active role in maintaining their own health and wellbeing.

The service had enough appropriately skilled staff to meet people's needs and keep them safe.

Right Care

People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life.

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. Staff understood and responded to their individual needs.

Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it.

People could take part in activities and pursue interests that were tailored to them.

Right culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the

management and staff.

Staff retention was good, which supported people to receive consistent care from staff who knew them well. This meant people received compassionate and empowering care which was tailored to their needs. We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Why we inspected

The inspection was prompted in part due to anonymous information of concern received by CQC and concerns from commissioners from a local authority. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe sections of this full report.

Rating at last inspection and update

The last report for Autonomy: Victoria & Elizabeth was published on 17 March 2021 and the service was rated good. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall 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 well-led?

Good ●

The service was Well-Led.

Details are in our Well-Led findings below.

Autonomy: Victoria & Elizabeth

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

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

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority care commissioners and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke with five members of staff including care staff, team leader, the registered manager and the nominated individual.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

We continued to seek clarification from the provider to validate evidence found. We requested further documents to support our evidence.

Is the service safe?

Our findings

Safe – this means we looked for evidence 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 sustained a Good rating. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were supported by staff who understood how to keep them safe from harm or abuse. Staff had received training in safeguarding to support them in recognising signs a person may be at risk of avoidable harm.
- The registered manager reported any potential safeguarding concerns through to the local authority safeguarding team and also the relevant social worker. They also notified CQC and followed up with information on action they had taken.
- Staff told us they had received safeguarding training and they were aware how to report concerns to people's safety. Staff were also aware of the provider's whistleblowing policy, which explained how they could report concerns to external health and social care agencies.

Assessing risk, safety monitoring and management

- Risks were assessed, monitored and managed. Care plans and risks assessments were in place and had been reviewed regularly.
- Discussions with staff and observation of staff supporting people, demonstrated they knew people well and were aware of people's individual needs.
- Environmental risk assessments were in place and all health and safety checks were carried out or planned to include maintenance of equipment.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- Staff were recruited safely; However, we found some checks were missing from staff files. However, we

were told that the information had been obtained but not filed or stored correctly. The provider told us this was being reviewed and a new system implemented to ensure there was clear evidence of the safe recruitment process they used going forward.

- Staffing hours were calculated using a dependency assessment. The manager calculated the hours of support required by people which ensured they had enough staffing to support their needs. The dependency assessment was reviewed as people's needs changed after discussion with other professionals involved in people's care and welfare.
- Staff training was robust and included mandatory training in all key areas such as Maybo training, infection control and safeguarding, and staff told us the training was good and they felt well supported in their role. Maybo is special training to effectively support people who display emotional distress associated with their health condition.

Using medicines safely

- Best practice guidance in the management of medicines was consistently followed. Records showed there were regular audits carried out on the way people's medicines were managed. As part of this audit the manager checked for any errors in people's medication administration records and how staff managed people's medicines. This helped to reduce the risk to people associated with medicines.
- Protocols for 'as required' medicines, known as PRN medicines, were in place. These ensured PRN medicines were given in a safe way and when needed.
- Medicines were stored safely and administered by trained staff who had their competencies assessed.

Preventing and controlling infection

- People were protected from the risk of infection. All staff had been provided with specialist infection control training; this included the correct use of PPE.
- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Visiting in care homes

The service facilitated visits when required but most people using the service went out to spend time with family.

Learning Lessons when things go wrong

- Accidents and incidents were recorded, and the information collated and analysed and used to inform measures to prevent incidents reoccurring.
- The registered manager was open and honest when things went wrong and took appropriate action to ensure lessons were learned to prevent similar events happening in the future.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our previous inspection this key question was rated as Good, at this inspection the rating has remained the same. The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager promoted a positive culture and encouraged feedback regarding all aspects of care and support.
- One person came into the office to say hello and told us "It's good here." We could see people were being supported in a way they wanted to be and staff listened to them.
- We found the registered manager very knowledgeable about people's need and preferences and worked hard to ensure they were delivering a service which engaged people and delivered holistic support.
- We saw one person had written most of their own support plan in a way which guided staff as to how they wanted to be supported and what activities they liked to do.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider had submitted notifications regarding incidents they were required by law to tell us about. The registered manager had a clear auditing process which showed who they had shared information with which included notifications to the care quality commission, safeguarding and the local authority.
- The provider ensured people were kept informed and apologised if errors occurred.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was very open and honest about what improvements were required and welcomed the inspection as an opportunity to develop the service.
- There were clear systems in place to monitor all areas of the service. There were audits to check the quality of care delivered and the registered manager ensured they worked towards continuous improvement.
- The registered manager made sure people received good care and support by supporting the staff team and having regular contact with people using the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People using the service had support prior to living at the service and people and their families were engaged with to ensure their needs could be met and the placement was right for their needs.
- People were engaged in activities they liked to be involved in. We saw people were involved in activities

which was relevant to their needs and which they enjoyed doing.

- The service ensured that they fully considered People's equality characteristics when planning support and activities ensuring that people were fully engaged with regards to their needs and preferences.
- Staff told us they felt well supported with regular supervisions and training.

Continuous learning and improving care

- There were a clear focus on continuous learning from staff and management.
- The registered manager listened to and acted upon the feedback received and took a proactive approach to improving the service.
- The management were open to feedback and were keen to ensure people received a high standard of care and support.

Working in partnership with others

- The service had a good relationship with health professionals who supported them with the health needs of those using the service.
- The registered manager told us they had forged good relationships with visiting health professionals