

# The Sandwell Community Caring Trust

## Abberley House

### Inspection report

6 Roland Vernon Way  
Tipton  
Dudley  
West Midlands  
DY4 0PS

Tel: 01215224860

Date of inspection visit:  
10 May 2022

Date of publication:  
10 June 2022

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

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 that 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.

### About the service

Abberley House is a residential care home providing respite support to people with a learning disability or other complex needs. This means people stay at Abberley House for short periods of time, providing a break for their usual carer. At the time of the inspection three people were being provided with personal care at the home. The service can support up to nine people.

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

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture.

#### Right support:

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were assessed so any potential risks were identified, and steps taken to keep them safe. Systems in place safeguarded people from abuse and staff were knowledgeable about how to support people safely. People were protected from harm through infection control measures and safe management of medicines.

#### Right care

Observations and records showed that people experienced choice and control over their support and care planning was person centred. The culture of the service promoted people's independence and people, relatives and staff all reported being part of a family. People were supported to express their views and treated with dignity and respect.

#### Right culture

Systems and processes in place promoted a positive culture at the home. Practices at the service were audited to monitor quality of the care people received and areas of improvement were identified. Further review of governance records was ongoing since the service reopened to people in October 2021 following the pandemic. There was good communication with other agencies to ensure people's needs were met.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 29 September 2018).

### Why we inspected

We undertook this inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process. As part of the inspection we assessed whether the service was applying the principles of right support right care right culture.

### 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?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service caring?**

The service was caring.

Details are in our caring findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-led findings below.

**Good** ●

# Abberley House

## 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.

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

Two Inspectors carried out the inspection.

#### Service and service type

Abberley House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Abberley House is a care home without nursing care. 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 and we wanted to be sure there would be people at home to speak with us.

#### What we did before inspection

We used information gathered as part of a monitoring activity that took place on 16 March 2022 to help plan the inspection and inform our judgments. We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the

service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and five relatives about their experience of the care provided.

We spoke with seven members of staff including the registered manager, assistant manager, a senior carer, carers and a cook.

We reviewed a range of records. This included three people's care records and 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with two professionals who regularly visit the service.

# 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

- People were relaxed and happy when spending time with staff members supporting them.
- People, relatives and staff said that people were safe. One relative told us, "If I didn't trust them [my loved one] wouldn't be going. I wouldn't want them to do anything differently. I know I can relax when [my family member] is at Abberley House."
- Staff received safeguarding training and understood the signs of abuse. Staff members felt confident to report safeguarding concerns should they arise.

Assessing risk, safety monitoring and management

- Care plans and risk assessments were in place to guide staff and help monitor people's assessed risks. Staff were knowledgeable about people's individual needs and how to protect them from harm.
- Family members were involved in the care of their loved ones and any decisions required during an Abberley House stay. One relative said, "I'm 100% consulted." Another relative told us how they were involved in the updating of care plans when their loved one's health needs had changed.

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 the provider was working closely with the supervisory body to ensure appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- Staff members told us there weren't always enough staff available in the team to comfortably cover the shifts required. However, staff worked well as a team to ensure people's needs were always met. The registered manager told us that new staff members had been recruited to address the shortfall going forward.
- We saw that there were adequate staff available to meet people's needs and to support people with their

chosen activities. On the day of our inspection, three people were supported to go out to a local attraction and then to lunch.

- Three staff files we viewed showed the staff members had been recruited appropriately. The provider had completed past employment and police checks before they started at Abberley House to make sure they were suitable to work with people.
- The provider told us they had measures in place to mitigate risks associated with COVID-19 related staff pressures.

#### Using medicines safely

- People at Abberley House were receiving their medications safely. Where people were prescribed 'as required' medications (PRN), there were protocols in place to advise staff about their use.
- Staff had received medication training and felt they had the skills and knowledge to support people with their treatments. Competency assessments were in place to review staff practice when administering medicines.
- Systems were in place to book people's medicines in and out of Abberley House. Weekly and monthly audits were carried out to ensure medicines were being managed effectively.

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Visiting in care homes

- The provider encouraged visitors to Abberley House during their loved one's respite stay. The registered manager ensured such visits were conducted in line with current government recommendations.

#### Learning lessons when things go wrong

- Abberley House had been unable to accommodate respite stays during the height of the pandemic due to government guidelines. The home reopened to support people in October 2021 and was currently accommodating a reduced number of people whilst the service got up and running.
- The registered manager demonstrated an open and transparent approach to learning lessons. They told us how they would respond, review and report an incident should it occur at Abberley House.



# 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

- During the pandemic, the registered manager regularly contacted family members of people who regularly stayed at Abberley House, despite being redeployed to an alternative post with the provider. One family member told us how isolated they felt from services at that time and how positive it was to receive those calls.
- One relative told us how their loved one's needs meant that not all activities were suitable for them. However, Abberley House ensured their relative was included in group activities. They said, "They always include [family member] and find something they can all do."
- We observed positive interactions between people and staff members during our inspection. One person told us, "It's good, it's like a family."
- People's individuality and diversity was considered. Care records contained information about people's preferences and what was important to them. For example, we saw that one person's care plan not only included how to support them with personal care but detailed what their favourite toiletries were.

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

- The registered manager encouraged people and relatives to explore alternative respite options when deciding if Abberley House was right for them. They told us, "No one can make an informed choice if they've had no choice. I say to people, I love Abberley, but I don't know if you will... It might take longer but I'd rather that than placing someone in the wrong place; it's not fair on the person."
- During our inspection we saw that people were involved in their care and given choices. For example, at a mealtime we saw people were given a free choice about what they wanted. One person was supported to look at the options available in the kitchen whilst they made their decision.

Respecting and promoting people's privacy, dignity and independence

- Relatives told us that they were respected as their loved one's primary carer and were always involved and updated by Abberley House staff. This meant they had confidence that their relative was well cared for during their respite stay. One relative said, "I never feel I have to worry; I know [my relative] is ok. They don't just look after them, they give that bit extra. They treat them as if they're theirs."
- Rooms were adapted to ensure people were supported in the least restrictive way that promoted their privacy and dignity. For example, door sensors were only activated if this was needed by the person. In such cases, care plans considered whether the person could consent or if such monitoring was in their best interests.
- Staff spoke positively about people at Abberley House and described how the team ethos was always to

put people and their experience first. One carer told us, "It's what we do, it's what we love."

# 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

- There were a variety of audits in place to provide the registered manager with oversight of the service and care delivery. However, we found that not all documents in place had been regularly reviewed. The registered manager was aware that some paperwork needed updating due to the service being closed during the pandemic. An action plan was in place to address these areas.
- Staff were clear about their roles and felt that Abberley House was a good place to work. One staff member said, "As long as Abberley House is open, that's where I'll be staying."
- The registered manager understood their legal requirement to notify us of all incidents of concern, death and safeguarding incidents.

Continuous learning and improving care; Working in partnership with others

- Following the reopening of the service in October 2021, admissions to Abberley House were slowly increased to support the staff team in running the service. The registered manager was open about any areas that needed addressing, such as renewing and reviewing some documents to ensure they were up to date.
- Professionals we consulted told us Abberley House worked in partnership with local services to ensure people's needs were met. We were advised that communication was very good, and the provider was responsive and consistent in following guidance from professionals.
  - The staff team received on-going training to ensure they had the appropriate learning, skills and knowledge to meet people's needs.

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

- Abberley House had fostered an open and positive culture to ensure people felt welcome and relaxed during their stay. People, staff and relatives all stated they felt part of a family.
- We received positive feedback from people, staff and relatives about how effective communication was at Abberley House. One staff member said, "Whatever issues you are having; whether personal, staff or clients, you go to them [the registered manager and assistant manager] and it will get sorted. I know I can tell them and they're on it straight away."
- There were established processes and procedures in place to ensure people received the care and support they wanted. One relative explained how staff supported their family member to have treats that didn't impact their health condition. They said, "Those little things mean the world to [loved one]. I wouldn't

let [them] go anywhere else."

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

- The provider engaged with people, relatives and staff through a variety of ways. The registered manager was in regular contact with families during the pandemic when the service was closed. Staff had regular supervisions and team meetings were held.
- We found people and professionals had recently been asked for feedback about Abberley House. The responses were reviewed and any learning taken forward.

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 their responsibility in relation to duty of candour.
- Staff were aware how to raise any concerns if they were to arise. Staff were encouraged and felt confident to escalate their concerns to higher levels of management should they need to.