

Voyage 1 Limited

Tentelow Lane

Inspection report

137a Tentelow Lane
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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

Tentelow Lane is a residential care home providing care and support for up to eight adults with learning disabilities. At the time of our inspection eight people were living there. They had all lived at the service for over 10 years, some for a lot longer. The service was managed by Voyage 1 Limited, part of the Voyage Care group, a national organisation providing care services.

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 happy living at the service. They were treated well by kind and familiar staff. They had opportunities to learn new skills and to live active and varied lives. People accessed the local community each day. They were involved in planning and carrying out tasks within the home, such as shopping, cooking and cleaning.

People received their medicines in a safe way and as prescribed. Their needs had been assessed and planned for and they had been involved in making decisions about their care and support.

The staff were well supported and happy working at the service. They told us there was good communication and they had the information they needed to provide care. Most of the staff had worked at the service for many years. They explained they felt there was a good atmosphere there and they had good relationships with the people who they cared for. The staff had access to a range of different training opportunities and had learnt new skills.

The registered manager was experienced and suitably qualified. People using the service and staff said that they were approachable and friendly. They had established effective systems for monitoring and improving the quality of the service and dealing with adverse events.

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

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.

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

Rating at last inspection

The service was rated Good at the last inspection (Published 17 May 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.

Tentelow Lane

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

Tentelow Lane 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

This inspection was unannounced.

What we did before the inspection

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 looked at all the other information we held about the service, including the last inspection report.

We used all of this information to plan our inspection.

During the inspection

We met six of the people who lived at the service, the deputy manager, a senior support worker and three support workers. We also met with the operations manager who visited the service during our inspection.

We looked at the care records for three people who used the service, four staff records, and other records used by the provider for managing the service, such as meeting minutes and quality monitoring. We also undertook a partial tour of the environment and looked at how medicines were being managed.

After the inspection

The provider sent us some information which we had requested which we had not been able to view during the visit to 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

- There were appropriate procedures for safeguarding people from abuse and whistle blowing. The staff received training in these and they discussed these during team and individual meetings with their manager. Information about how to report abuse was on display.
- The staff kept records to show how they had responded to incidents of concern, how they had shared this information with others and investigated these concerns.

Assessing risk, safety monitoring and management

- The individual risks to people's safety and wellbeing had been assessed. These assessments included information about how risks should be reduced or mitigated. People were supported to be independent where they were able. Their care plans included ways to help people identify risks themselves and think of ways to reduce these. For example, there were guidelines about keeping safe for people who accessed the community independently. Risk assessments and management plans were regularly reviewed and updated.
- The provider had assessed the risks associated with the environment, such as fire safety, electrical, gas and water safety. Where risks had been identified they had planned for these and followed safe practices to reduce these risks.

Staffing and recruitment

- There were enough suitable staff to keep people safe and meet their needs. Most of the staff had worked at the service for many years and knew people well. Staff absences were covered by the existing staff team and regular workers employed by the provider on 'as required' contracts. People using the service and staff told us there were enough of them.
- The provider carried out a range of checks on new members of staff including references from previous employers, checks on any criminal records and formal interviews. One or two of the people living at the service helped with the staff recruitment, sitting in on interviews to make sure they felt staff were suitable.
- Following successful employment, the staff undertook a range of training and an induction. During this time their competencies and skills were assessed. This meant that the provider was able to address any concerns they identified once the staff members had started work for them.

Using medicines safely

- People received their medicines in a safe way and as prescribed. All the staff were trained so they knew how to manage medicines safely. The registered manager regularly observed them and tested their skills and knowledge regarding medicines management.
- There were clear procedures for the safe storage and administration of medicines and record keeping. We saw these were being followed. Staff regularly audited medicines supplies and records and these audits

showed people had received their medicines as prescribed.

- The staff had received additional training from clinicians, so they could administer insulin to one person. Insulin is a medicine for managing diabetes which requires an injection. One member of staff explained that prior to this training, visiting nurses had to administer this medicine and this had sometimes not happened at the correct time. They explained that since the staff could now do this the person received more timely care and had more freedom to be away from home. They kept clear records to show how, where and when this medicine was administered.
- The staff had also worked alongside healthcare professionals to review and reduce the amount of behaviour controlling medicines people were prescribed. This meant that when people became anxious or agitated the staff tried a range of other techniques to calm people rather than administering medicines. This had been discussed at team meetings to make sure all staff understood why this was important and worked together to enable this.

Preventing and controlling infection

- The provider had procedures regarding the prevention and control of infection and these were followed. The staff received training regarding good practice. They wore protective clothing, including gloves, aprons and hair nets to reduce the spread of infection when providing care or handling food.
- The environment and equipment were well maintained and kept clean. The staff carried out regular checks and audits of cleanliness.
- People using the service and staff were encouraged to have appropriate vaccinations, such as the seasonal flu vaccination to help reduce the risks of infection spreading.

Learning lessons when things go wrong

- The provider had systems for learning from incidents, accidents and complaints. Following any adverse event, the staff made sure people were safe and well. They shared information with the registered manager and others who needed to know. They also reflected on what had happened to see if there were ways to prevent reoccurrence. These processes were recorded.

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.

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

- Care was delivered in line with standards, guidance and the law. People had lived at the service for over 10 years and therefore their needs were well known by the staff and care plans were reviewed and developed with each person regularly. The care plans included assessments of individual needs and risks to safety.

Staff support: induction, training, skills and experience

- People were supported by well trained, skilled and experienced staff. New staff completed a range of training relevant to their roles and responsibilities. The staff we spoke with confirmed they had regular training opportunities and training was useful for them. They said they were supported to request additional training where they identified a need or wanted more experience. Records at the service showed that the staff had undertaken training required for their role and this was regularly updated.
- The staff told us they felt supported. They said they worked well as a team and communicated well with each other. They said the management team worked closely with them, listened to them and offered guidance when needed.
- The provider regularly monitored staff performance through observations, appraisals and individual supervision meetings. This were recorded and showed that where improvements were needed the staff were given the support required. There were regular team meetings where policies, procedures, the needs of people using the service and guidance were discussed. There was also a record to show external speakers had offered training at some staff meetings to help provide staff with information and new skills.

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

- People had enough to eat and drink. They were involved in choosing the menus, shopping and preparing food. There was a varied menu and people were able to request something different if they wanted. The service was well stocked with fresh food, including fruit and vegetables and each meal was freshly prepared. Some people had special diets and restrictions on the food they could eat. Separate storage and preparation areas were used for Halal food.
- The staff monitored how much some people drank because they were at identified risk of becoming dehydrated. People were able to help themselves to drinks and snacks at any time.
- People's care plans included information about their dietary needs and any risks associated with these. The care plans were regularly reviewed.

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

- People were supported to maintain good health and access the healthcare services they needed. People

had active lives and ate a healthy diet, and staff told us they felt this contributed to their good health. When people needed they saw doctors and other healthcare professionals. There were clear records of these consultations and staff followed guidance. Each person had a hospital passport. This was a document designed to support staff in different services to understand about the person's needs.

- Some people were living with health conditions. The staff made sure they provided the care and support people needed. For example, they had undertaken additional training, so they could administer injectable medicines to one person who needed this. This had allowed the person to have more freedom and flexibility in their life and had ensure they remained healthy and safe.

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

- The building was suitable to meet the needs of people who lived there. People had personalised their rooms and had the equipment, furniture and décor of their choices. Communal rooms were decorated in a homely manner and were well equipped.
- The provider had ensured the building was adapted to reflected changes in people's needs. For example, they had installed a stairlift, a specialist bath and a sensory room.

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 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 MCA.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

We checked whether the service was working within the principles of the MCA.

- People were supported to make decisions about their lives. Throughout their care plans there was evidence of involvement in decision making. The staff had undertaken assessments of people's mental capacity and recorded where others should be involved in decisions in their best interests. Care plans also included clear descriptions about how people communicated and how best to present information so they could make informed decisions.
- People had signed consent to their care plans and had been involved in the regular review of these.

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

- People had good relationships with the staff and each other. There was a friendly atmosphere at the service. People told us they liked and trusted the staff. We witnessed kind and considerate interactions which showed affection between staff and people using the service.
- People came from a range of different cultural and ethnic backgrounds. Their individual needs were respected and they were supported to celebrate their own and other people's culture. People attended places of worship and enjoyed special religious events together. The staff also had diverse cultural needs and they told us they were able to speak a number of different languages between them, including the first languages of all the people living at the service. This meant they could help people with communication as well as understanding their cultural and religious needs.
- The staff spoke about people they cared for in a respectful way. Their interactions also showed respect and people were encouraged to make choices about what they did and where they spent their time.

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

- People were supported to express their views and be involved in making decisions about their individual care and about the service. Care plans demonstrated people had been consulted about all of their decisions. There were regular reviews which people had contributed to and everyone met with a key member of staff to discuss their care plan at least once a month.
- Two people living at the service had been selected as representatives for others. They met with the registered manager monthly to discuss the service and any changes people wanted. The staff told us they had helped to identify specific needs for others, for example noticing that one person had struggled to open heavy doors. The staff said that as a result of these meetings they had been able to make changes to improve the service based on what people wanted and needed. The representatives were also involved in the recruitment of staff.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity were respected. The staff had training in this area and demonstrated a good understanding about the principles of dignity and respect. We witnessed the staff asking people whether they wanted care and support and respecting their decisions.
- People were supported to be independent and learn new skills. Some people accessed the community independently. They had been supported to understand about travelling safely and personal safety. Others had learnt new skills within the service, such as preparing meals and helping to keep the house tidy. The staff recorded when people had learnt a new skill or shown independence. These records were monitored

and discussed by the staff team so they could work together to improve people's independence.

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 personalised care which met their needs and reflected their preferences. They told us their needs were met and we could see that the staff knew them well, understood their needs and provided support in line with their preferences.
- Care plans were written and reviewed with the person. They included information about things that were important to them, how best to support them and what good care looked like for the person. There was detailed information about their social needs, likes, dislikes and what caused the person distress. People met with a member of staff each month to discuss the care they had received. This ensured that staff understood the person's perspective of their care and could make changes if these were needed.
- People using the service, the staff and others who were important to people met at least annually to agree specific objectives. These included becoming more independent and taking part in activities of their choice. The objectives were personalised and were regularly reviewed to make sure people were being supported to achieve these.
- The staff gave us examples about how people's lives had changed at the service. They told us some people's anxiety levels had reduced because of the way in which they had been cared for and supported. They also explained how they had adapted the environment and care being provided when people's health had deteriorated to make sure their needs were still being met.

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.

- The way in which people communicated was central to how care and support was planned. There were communication care plans and information about how people made decisions. These included how best to support people to understand information.
- Some people had autism and needed clear visual information and structure. The staff made sure this was provided and used pictorial information boards to let people know what they would be doing each day and the staff who were on duty.
- Other people had sensory impairments. The staff had a good understanding of these and made sure people had the support they needed to stay safe and be involved in making decisions about their lives. The staff were trained to use Makaton (a type of sign language) to communicate with some people.

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's relationships outside of the service were valued and supported. The staff enabled people to stay in touch with their families and friends. They also supported them to develop relationships with other people using local services through attending clubs and special events. They had recently attended a fun day, for which people using the service and staff from Tentelow Lane had provided the food.
- People took part in a wide range of different activities which included sport, visiting places of worship, holidays and other leisure activities and voluntary work. One person also undertook quality monitoring reviews of other services as a peer reviewer.
- One member of staff told us how they had worked with a person and their family in order for them to attend an important family event. They said the family had been concerned that the person may feel distressed at the event, but they had ensured the right support was in place to allow the person to attend and leave when they felt ready.

End of life care and support

- The staff had developed care plans specifically around the support people might need at the end of their lives and their preferences following death. They had consulted with the person and their families to make sure their needs and preferences were recorded. Care plans included details about the person's awareness and understanding in this area, religious and cultural needs and who to contact in an emergency. This meant that should people need this support the staff had information to hand to know what to do.
- No one was unwell or receiving end of life care at the time of our inspection.

Improving care quality in response to complaints or concerns

- The provider had an appropriate complaints procedure and information about this was shared with people using the service and their relatives. There had not been any complaints. The operations manager told us they thought this was in part due to the good communication the staff maintained with people using the service and families. They said that any concerns were quickly identified and acted on.

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.

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

- There was a person-centred culture at the service. People living there were involved in making decisions about their care and the service. They were treated respectfully by staff and felt happy living there.
- The staff were also happy and felt well supported and valued. They told us the registered manager always celebrated the anniversary of their start date with a small gift and celebration. They told us the registered manager and organisation listened to their opinions.

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 procedures for responding to incidents, complaints and when things went wrong. The staff demonstrated a good understanding of this and told us, "We always apologise if something goes wrong."

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

- The registered manager had been in post at the service for over 20 years. They knew the people who lived there, staff and provider well. They had a good understanding of the legislation and guidance governing care and what good care looked like. People using the service and staff gave positive feedback about the registered manager with comments which included, "The manager is very good" and "He is very supportive, and I have learnt a lot."
- The staff told us the provider's senior managers were supportive. They said that when the registered manager was on leave the operations manager contacted them daily to check everything was alright and ask if they needed any assistance.

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

- People using the service were involved in every day decisions about the home. They were consulted by staff about what they did, ate and how they wanted the home to look. They also made decisions about their own care.
- The provider asked people using the service and other stakeholders to complete annual satisfaction surveys. They used feedback from these to help develop improvement plans.

Continuous learning and improving care

- The provider had a range of systems and processes for monitoring and improving the quality of the service. These included checks by staff and management. The provider also undertook quarterly monitoring of the service and created an action plan where they identified improvements were needed.
- One of the people living at the service was a member of the local authority partnership board and provider's own quality monitoring team. They had a role auditing other services and working with others to help improve services in general.

Working in partnership with others

- The provider held regular manager meetings which enabled the registered managers of different services to work together and share ideas. The registered manager also attended Local authority forums where they met and worked alongside other providers.
- The staff worked closely with other healthcare professionals to make sure people received the right care and support.