

New Directions Flexible Social Care Solutions Ltd 75 Hill End

Inspection report

75 Hill End Lane St Albans Hertfordshire AL4 0RA

Tel: 01727811906 Website: www.newdirectionsfsc.co.uk Date of inspection visit: 11 May 2017 <u>15 May</u> 2017

Good (

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Ratings

Overall rating for this service

Is the service safe?	Good $lacksquare$
Is the service effective?	Good •
Is the service caring?	Good •
Is the service responsive?	Good $lacksquare$
Is the service well-led?	Good •

Summary of findings

Overall summary

The inspection took place on 11 and 15 May 2017 and was unannounced. This was the first inspection since the service was registered in August 2016.

75 Hill End Lane provides accommodation for up to 7 people with mental health conditions, learning disabilities and or physical disabilities. At the time of this inspection there were 7 people living 75 Hill End Lane.

There was a registered manager in post who was registered with CQC. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People told us they felt safe living at 75 Hill End Lane. Staff understood how to keep people safe and risks to people's safety and well-being were assessed and kept under regular review to help to keep people safe. People had their needs met in a timely way and we observed there were sufficient numbers of staff who had the right skills and experience to support people safely. People's medicines were managed safely, by staff who had received training.

There was a robust recruitment process in place. Pre-employment checks were completed prior to staff commencing work at the service. This helped to ensure that staff who were employed at the service were suitable to work in this type of care setting.

Staff received regular support from their line managers which included attending team meetings and individual supervision with their line manager. Staff told us they felt well supported.

People received support and encouragement they needed to eat and drink sufficient amounts to help maintain their health. People were supported to maintain their physical and mental health and staff made referrals to healthcare professionals when required.

People and their relatives gave positive feedback about their experience of the service. They were also complimentary about the staff and management at the service. We observed staff to be kind and caring. Staff were knowledgeable about people's individual requirements in relation to their care and support needs and preferences. People and or their relatives had been involved in the planning of their care where they were able to and where this was appropriate.

Visitors were welcomed to visit family members at all times as long as this was arranged in advanced with staff in case people were out. There was a cheerful ambience around the home. People were supported to pursue hobbies and things that were of interest to them both at the service and the community.

There were arrangements in place to receive feedback from people who used the service and their relatives. People were able to raise any concerns they had and told us that they were confident they would be listened to and any concerns raised would be addressed.

There were systems and processes in place to regularly monitor the quality of the care and support provided for people who used the service. Where shortfalls were identified actions were in place to make the required improvements.

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 🔍
This service was safe.	
Risk assessments were completed to help keep people safe	
People's care was provided by appropriate numbers of staff who had been through a robust recruitment process.	
Staff had been provided with training to help support them to meet the needs of the people who used the service.	
Staff understood how to recognise potential abuse, and knew the process for reporting concerns.	
People's medicines were managed safely.	
Is the service effective?	Good ●
The service was effective.	
People received care and support from staff who were trained and supported in their roles.	
People's consent was obtained and they had had their capacity assessed in line with MCA guidance.	
People were supported to maintain a healthy balanced diet.	
People were assisted to access health care professionals to help maintain their health and wellbeing.	
Is the service caring?	Good ●
The service was caring.	
People were treated in a kind and caring way.	
Staff demonstrated a good understanding of people's needs and wishes and responded accordingly.	
Staff had developed positive and caring relationships with people they clearly knew well.	

Is the service responsive?	Good ●
The service was responsive.	
People's care was provided in accordance with their assessed care needs.	
People were supported to pursue hobbies and areas of interest.	
There was a complaints process in place and we saw that complaints were investigated and responded to appropriately.	
People and their relatives felt that they could raise concerns and that they would be acted upon.	
Is the service well-led?	Good ●
The service was well led.	
People, their relatives, and staff felt the home was well managed and they had confidence in the management team.	
The provider had robust systems in place to monitor and effectively manage the quality and safety of the service.	
People and their relatives felt the staff and managers worked in an open and transparent way, and that they were approachable and supportive.	



75 Hill End Detailed findings

Background to this inspection

This inspection took place on 11 and 15 May 2017. The inspection was undertaken by one inspector.

Before our inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us.

During the inspection we observed staff supporting people who used the service. We spoke with two people who used the service, three care staff, the home manager and the registered manager. We received feedback from two relatives of people who used the service to understand more about their experience of the service, and how they were supported to live their lives.

We received feedback from commissioning staff. We also used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed care records relating to three people who used the service, two staff recruitment records and other documents relating to people's health and well-being. These included staff training records, medication records and quality monitoring audits. We reviewed information from staff meeting and resident co-production meetings.

People told us that they felt safe living at 75 Hill End Lane. One person said, "I feel safe, I know that if I need anything the staff are on hand to support me". Another person told us "I have not been here long but do feel safe and reassured knowing there are staff around to support me when I need it"

Staff had been trained in how to safeguard people from avoidable harm and were knowledgeable about the potential risks and signs of abuse. Staff were able to demonstrate how they would report any concerns both within the organisation and externally if required. They told us that they would not hesitate to report any concerns and would support other staff to do the same. Information and guidance about how to report concerns, together with relevant contact numbers, were displayed on the notice board in the home and were accessible to staff, people and visitors to the home. This showed that the provider had taken the necessary steps to help ensure that people were protected from abuse and avoidable harm.

Where potential risks to people's health, well-being or safety had been identified, these were assessed and reviewed regularly to take account of people's changing needs. Risk assessments were in place for people for epilepsy, deteriorating mental health, how to identify and manage behaviors which challenged. These assessments were detailed and identified potential risks to people's safety and the measures that were put in place in place to mitigate and reduce risk.

People, told us that there were enough staff available to meet people's needs. One person told us, "I never have to wait more than a few minutes, if staff are assisting someone else they will come and help me afterwards". During the inspection we observed people were assisted in a timely way and that people received their care and support when they needed it.

Safe and effective recruitment practices were followed to make sure that all staff were suitable to work in this type of service. Pre-employment checks were completed in the recruitment records we reviewed for two staff. these included exploring any gaps in employment history. taking up a minimum of two satisfactory references and criminal record checks.

There were appropriate arrangements for the safe storage, management and disposal of medicines and people were supported to take their medicines by trained staff. Medicines were dispensed from individual pods which were colour coded and contained a brief description about each medicine inside the pod. People told us that they received their medicines regularly and that they were satisfied that their medicines were managed safely. We checked a sample of medicines and found they were correctly labeled, had been dated to say when they were opened and were all within the manufactures use within date.

People and their relatives told us that the care and support provided at 75 Hill End Lane was appropriate to meet people's needs. One person said, "It is a really nice place to live, I like it much better than the previous home" Another person told us, "I am very happy with the care and support, I have received since I came to live here. I do feel safe with staff support".

Staff received training to support them to be able to care for people safely. The registered manager told us of various training that had been undertaken by the staff. This included safeguarding, Fire Safety, food Hygiene, moving and handling and some specific training such as epilepsy and Autism awareness. The management team and staff confirmed that staff support arrangements were in place which included team meetings, and individual supervision meetings. Staff we spoke with said they were well supported and were always able to approach managers to ask for help or support. fully confident to approach the management team for additional support at any time.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working in accordance with MCA guidance and whether any conditions on authorisations to deprive a person of their liberty were being met. All staff had completed relevant training and understood their role in protecting people's rights in accordance with this legislation. The registered manager demonstrated a good understanding of when it was necessary to apply for an authority to deprive somebody of their liberty in order to keep them safe. They had an awareness of what steps needed to be followed to protect people's best interests and how to ensure that any restrictions placed on a person's liberty was lawful. At the time of the inspection 1 person had a DOLS in place to help keep them safe.

People told us, and our observations confirmed that staff obtained peoples consent before they provided support. Staff members were knowledgeable about capacity, best interest decisions and how to obtain consent from people with limited or restricted communication skills.

People who were assessed as requiring support received it to help with shopping, menu planning and preparation of food. They all had access to the kitchen and were able to help themselves to food and drinks as they wished. There was no set meal times and we saw people ate at various times that suited them.

People told us that their health needs were when required and in a timely way. Staff and people gave us examples of how people accessed health and social care professionals when necessary. A relative told us

that they were always kept up to date with information relating to their family member's health and well being. We saw from care records that appropriate referrals were made to health and social care specialists when this was needed such as the community mental health team and people attended appointments with their GP or dentists when required.

We spoke with two visiting healthcare professionals who were reviewing a persons care needs. They gave us positive feedback about the service provided. One health professional said, "We have no concerns at all, staff here have good qualities and overall knowledge, the staff are very proactive. Another who was visiting the service for the first time said "I feel my experience has been a positive one".

People told us they felt staff were kind and caring and were aware of people's individual personalities and respected their wishes. One person who used the service told us, "I enjoy living here I have my independence but the staff provide reassurance and are on hand to talk me through any difficult situations. They give you the space you need and respect your privacy". We observed people interacting with the registered manager who demonstrated they had a good relationship with people who used the service.

We saw that staff were kind and gentle in their approach towards people. Staff demonstrated they were passionate about their work and appeared to be genuinely happy in their roles. During our inspection we observed that there was good communication between staff and the people who used the service. One person who was having a review was having a chat with staff who were reassuring the person not to worry and they continued to provide support throughout the process. They also showed respect to the person and involved them fully in the discussion making sure they were able to contribute fully to the process, were central to the discussion and took into account what their goals were and how they could be supported to achieve them.

Staff respected people's dignity at all times and made sure they supported people in the way they choose. Staff encouraged people to remain as independent as possible and helped them to achieve things they would otherwise not have the confidence to do. We observed that staff were always courteous and kind towards people they supported. We saw staff promoting people's dignity and privacy knocking on people's doors and waiting before entering people's rooms. Staff and people they supported had clearly established boundaries which were maintained.

There was a nice homely atmosphere at the service it was warm and welcoming. People's individual bedrooms were personalised to reflect their individual personalities and areas of interest.

Staff had developed positive and caring relationships with people and demonstrated they clearly knew them well. People had individual key workers and they were the main point of contact for people. People were observed to be relaxed and comfortable to approach and talk with support staff, and the management team. We observed all staff interacting with people in a cheerful, warm and caring manner listening to what they had to say and taking action where appropriate.

People were offered choices and these were respected which contributed towards people feeling that they had control in their lives.

People's care records were stored in lockable cupboards in order to maintain the confidentiality of people who used the service. We noted that information provided to us during the inspection was returned by staff for safe keeping when staff were not using them.

There were photographs of the staff team on display in the hall so that people knew what staff were on duty. Agency staff were not used at the service and the same small group of staff provided consistency of care to people who lived at the service. This helped staff to develop meaningful relationships with all the staff.

Is the service responsive?

Our findings

People and where appropriate family members had been involved in developing people's care plans. People's care plans were reviewed regularly to help ensure they continued to meet people's needs.

We found that the management and staff team worked in partnership with people who used the service on the development of all aspects of the service. One person told us "I have recently volunteered to be a representative on the co-production group which involves attending fortnightly meetings with the registered manager to continuously discuss and implement service development" The registered manager told us that "any changes were done with consultation and involvement of people who used the service with the aim making the service truly person centred and to move away from the culture of simply encouraging client involvement and feedback (essentially to tick a box) but genuinely valuing client input and ideas in shaping their service whilst giving them as much control as possible".

The registered manager told us "We found that the engagement in Co-Production had far exceeded our expectations". They went on to tell us "We observed such a difference in people's self-esteem and confidence from just being involved in the discussions and having their name on policies and documents and this had encouraged the management team to create a formal Co-Production framework which enabled them to co-produce everything they do with people who use the service".

For people who used the service in particular the registered manager told us "There have been a multitude of positive outcomes, we have seen clients confidence and self-esteem significantly improved." For example "One client who used to be supported by the services Outreach team was able to successfully get a part-time job and commented that their attendance at Co-Production meetings had allowed them to feel more comfortable talking to other people they had never met and therefore made their interview far less anxiety provoking". "Another recent success story was from a person who had attended training in First Aid and Basic Life Support and was able to use those skills at home when their sibling was suffering from a seizure, something they felt they would have been unable to do previously".

The registered manager showed us some examples of how the service was able to respond to peoples changing needs and attitudes and where people were involved through Co-production this included supporting people with the self-medication procedure which were completely created by people who use the service with no input from staff. People also updated the company's values statement and other documents which included Induction forms and procedure, Service risk assessments. People were involved in the develop of Interviewing practices, changing rota shift patterns, the creation of a Family Liaison Role based on discussions about family involvement with clients. The introduction of online client file software which allows clients to have their own logins to view and update their own records and the commissioning of a yearly service user training calendar for service users to attend the same mandatory training as staff working at the service.

We saw that there was a complaints policy and procedure in place.

Complaints had been properly investigated and responded to in accordance with the complaints procedure.

People who used the service told us that they would be supported to raise any concerns with the registered manager. One person said, "I don't have anything to complain about at the moment but a while back I did have an issue, I spoke to the staff and they had a word with the person, it was all sorted out quickly". Another person told us there are leaflets informing you how to complain if you need to".

We saw that compliments had also been recorded. One family member who gave us feedback said "The service and staff are really kind and caring. We have no doubts about [relative] living at 75 Hill End Lane. They also confirmed they felt any feedback was acted upon and that they were listened to.

People who used the service told us they felt the service was well managed. People knew the registered manager and told us they regularly spent time at the service and was involved in some of the day to day running of the service along with the home manager and said they were both very supportive and approachable. One person told us about their involvement with Co- Production at the service and told us about some of the things that had changed at the service for example they told us that they have been involved with the development of a quarterly newsletter and could contribute to what is included, they went on to say the management team definitely listens to us and takes our feedback seriously.

The registered manager and the home manager demonstrated an in-depth knowledge of the people who used the service and the staff they employed. They were familiar with people's needs, personal goals and family relationships. One staff member in particular told us "I have a special need which has been taken into account and the support I have received from the home manger in particular has helped me no end". They went on to say "I am so grateful for their support and the opportunities they have given me". Managers and the staff team were open and transparent throughout the inspection process. We observed them interact with people who used the service, and staff in a positive, warm and professional manner.

Staff told us that there were regular staff meetings and Co production meetings held to enable them to discuss any issues arising in the home. We saw minutes from the meetings which demonstrated that all aspects of the service were discussed including any actions that were required. The staff and management team strived to continually improve the home and outcomes for the people who lived there. There were regular management meetings to discuss strategic items including the business plans for the future.

The registered manager told us that all records were being transitioned to being held electronically, thus improving communication. The registered manager had been extensively involved in the implementation of this work. They told us "If there was an issue or concern with a person who used the service the information was uploaded onto the IT system and could be viewed by all staff therefore making the system effective in supporting timely information sharing".

There were audits in place to manage and monitor the overall quality and safety of the service. These included such areas as fire safety checks, building maintenance checks and records were regularly audited to make sure they were kept updated.

The registered manager worked closely with the home manager to maintain standards for example to ensure staff support such as supervisions, appraisals, audits, equipment checks, meetings and any other matters had been completed. These various audits showed that the registered manager and provider were committed to providing a safe service.

Annual surveys were circulated to people who used the service, their friends or advocates', relatives and relevant professionals. Once the completed surveys were received the registered manager collated the

information and produced a report of the findings which was shared with the people and provider along with suggested actions. People and their relatives we spoke with during the course of this inspection were positive about the standard of care and facilities provided at 75 Hill End Lane.

Providers of health and social care are required to inform the Care Quality Commission, (CQC), of certain events that happen in or affect the service. The registered manager had informed the CQC of significant events in a timely way which meant we could check that appropriate action had been taken. Accidents and incident too were appropriately recorded and kept under review.