

Lyndale (Hereford) Limited

Sunnydale

Inspection report

32 Shrewsbury Road
Craven Arms
Shropshire
SY7 9PY

Tel: 01588673443

Date of inspection visit:
09 August 2017

Date of publication:
20 September 2017

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

Sunnydale is registered to provide accommodation and personal care to a maximum of 10 people with mental health problems. There were eight people living at the home on the day of our inspection. The home has long term beds, but has recently started operating as a rehabilitation service where people are working towards more independent living and independence within a defined period of time. People have their own rooms and use of communal areas inside and outside the home.

At the last inspection on 12 August 2015, the service was rated Good. At this inspection we found the service remained Good.

People continued to receive care which protected them from avoidable harm and abuse. Staff supported people's needs in a safe way, monitored risks to their safety and were available when people needed support. People's medicines were managed and stored in a safe way, and they had their medicines when they needed them.

Staff received the training they needed to meet people's individual needs. Staff asked for people's consent before they helped them with any care or support. They understood what they needed to do if people could not make their own decisions. People were supported and encouraged to maintain good health by making healthy eating choices and attending healthcare services.

People were cared for by staff whom they had good relationships with. People were involved in their own care and were supported in achieving their goals. Staff respected people's privacy and dignity when they supported them and encouraged their independence.

People received care and support that was individual to them. Their support needs and personal goals were kept under review and staff responded when there were changes in these needs. People had opportunities to give feedback and make complaints about the care and support they received.

People had opportunities to make suggestions for improvements at the home and these were listened to. People lived in a home where they felt comfortable to speak with staff and managers about the concerns and issues that affected them. The provider had systems in place that continued to be effective in assessing and monitoring the quality of the service provided.

Further information is in the detailed findings below.

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 remains Good.

Is the service effective?

Good ●

The service was effective.

Staff respected people's right to make their own decisions and supported them to do so. Staff had the skills and knowledge to meet people's needs effectively. Where required, people were supported to eat and drink enough and access healthcare services.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Sunnydale

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 9 August 2017 and was unannounced. The inspection was carried out by one inspector.

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

We reviewed information we held about the service. We looked at our own system to see if we had received any concerns or compliments about the home. We analysed information on any statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law.

We contacted representatives from the local authority and Healthwatch for their views about the home. We used this information to help us plan our inspection of the home.

We met and spoke with three people who lived at the home. We spoke with five staff, which included support workers, team leaders, and the registered manager. We viewed two people's care and medicine records, including how consent was obtained. We also looked at other records relating to the staffing and management of the home such as quality monitoring reports, recruitment and training.

We observed how staff interacted with people and how they received their care and support to gain people's experience of living at the home.

Is the service safe?

Our findings

At this inspection, we found people continued to be supported in a safe way and were protected from avoidable harm and abuse. The rating continues to be Good

People were protected from avoidable harm and abuse. People told us they felt safe living at Sunnydale because there were always staff around and the environment felt secure. One person said, "I feel safe here because this is a good place for me to be. There is always someone around and I feel staff look out for me." People told us if they had any concerns about their safety they would feel comfortable to speak with one of the staff or managers.

Staff understood how people could be at risk of abuse or discrimination. One staff member told us people could be at risk when out in the local community as they could be taken advantage of. People could also neglect themselves with, for example, their personal care. All staff told us they would report any concerns to managers or ring the safeguarding number that was displayed in the office. One staff member said, "We have access to policies that tell us what to do." The registered manager understood the process they would need to follow if they had concerns about people's safety. Our records show that where an allegation of abuse had been reported the registered manager took the appropriate action, followed local authority safeguarding procedures and notified CQC as required.

Risks to people's safety and wellbeing continued to be assessed and monitored regularly. The support people needed was provided in a way that enabled them to live their lives safely and maintain their independence. We saw clear plans were in place to ensure people were protected from risk both within the home and when out in the community. These risks included the environment at the home, road safety or risks associated with their health and medical needs. Staff were aware of risks associated with people's care and knew the support they needed to help keep them safe.

People told us there were enough staff and they got help when they needed it. One person said, "I just shout for help if I need it and the staff are with me." Staffing levels were based on the individual needs of the people who lived at the home. The number of staff that worked was flexible to take into account healthcare appointments or any trips out. Although agency staff were used occasionally, staff told us they always tried to find a staff member to work rather than use agency staff to keep a consistency of care for people. Recruitment procedures continued to be managed safely. Staff were only employed once all required background and past employment checks had been completed. This helped to make sure staff were suitable to work with people who lived at the home.

People continued to have the support they needed to take their medicines safely and as prescribed. One person told us they were working towards managing their own medicines and understood the support they needed to achieve this goal. We observed how people received their medicines and found staff to be organised and focused on each person. Two staff were always present when people received their medicines. The registered manager explained this was a company-wide policy and helped to reduce the risk of medicine errors. Staff had received training to manage and administer people's medicines safely and their

practice was checked to help ensure they stayed competent in this role.

Is the service effective?

Our findings

At our last inspection we gave a rating of requires improvement for this key question. This was because staff did not understand how to support people's rights if they did not have the capacity to give their consent. At this inspection staff understanding had improved and we changed the rating to Good.

People told us staff asked them for their permission before they helped them with their care. One person said, "They always ask if it's okay to do something or am I happy with what they're doing." We heard staff ask for people's consent and offer them choices with regards to taking their medicines, what they would like eat or drink and what they would like to do with their time. Staff understood the importance of gaining consent from people and the principles of making best interest's decisions when people may not be able to make their own decisions.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Staff had received training in the MCA and understood what needed to happen if people could not make certain decisions for themselves. One staff member told us, "It's for people who haven't got capacity to make decisions, and then others would make them in their best interests. We will also support people to make the best decision, but it is their choice." The registered manager understood the process they needed to follow to make sure any DoL was applied for legally. One person had a DoL authorised and there had been conditions placed on this authorisation. This information had been incorporated into their care plan to help ensure they were kept safe. We found that staff knew how to support this person and keep them safe in accordance with their care plan, but they could not tell us this person had a DoL in place. We shared this with the registered manager who told us they would raise staff's awareness of this.

People told us staff were well trained and knew how to do their job. One person said, "The staff understand me and how to help me, so they are trained well." The training staff completed was specific to people's individual needs, which included mental health awareness. One staff member said, "We have a good staff mix and with our training, it gives them (people) confidence to trust us because we are confident in what we're doing." New staff completed a structured induction programme where they worked alongside more experienced staff members. Staff took part in regular one to one meetings with their managers where they received feedback on their practice and spoke about their training needs. This helped to make sure staff had the skills and knowledge to support people effectively.

People were supported to have enough to eat and drink and were encouraged to maintain a healthy diet. One person told us they were diabetic and had to watch what they ate. They told us staff spoke with them about their diet and encouraged them to have sugar free, rather than, sugary drinks. People told us menus were provided but they could choose what they had to eat. They also had access to a kitchenette area where they could make their own drinks and snacks. They were also encouraged to prepare and cook meals. This encouraged them to improve their independence and was part of most people's agreed goals.

People were supported to access healthcare services as required. One person told us that they visited the hospital regularly and a staff member always went with them. Another person had had a visit from their GP whilst we were at the home and they told us staff had arranged this for them because they were not well. Staff supported or arranged healthcare appointments as necessary to ensure the continued health of people.

Is the service caring?

Our findings

At this inspection, people continued to receive care and support that was provided in a kind and caring way. The rating continues to be Good.

People told us they thought the staff were kind and caring in their approach to them. One person said, "This is a good place, with very good staff. They are helping me to reach my goals." We saw people were relaxed with staff and staff took time to talk to people, whether it was a passing comment or more meaningful conversations. Staff addressed people in a respectful manner and made sure they understood what had been said to them. One person had asked for some more pain relief tablets. The staff member worked out how long ago they had had their last tablets. They took the time to ensure the person understood what time they could have some more and the reason for this. They made sure the person was happy with this.

People told us they felt involved in their own care and that staff spoke with them about what support they wanted and needed, their preferences and about any preferred routines they had. One person spoke about their keyworker. They said, "We meet regularly for a meeting but all I have to do is ask and we will go out and have a one to one chat and a coffee. It's nice to have a break from the home and we talk about what I want." A keyworker is an allocated staff member who works closely with people to talk about and review their needs.

People were encouraged to complete their own daily record. One person told us this recorded information about what they had done, the support they had needed, their behaviour and mood and any healthcare appointments they had attended. The registered manager told us it helped people to stay involved and take responsibility for aspects of their care and support.

Staff kept people involved in their own care by talking with them and building positive relationships with them. One staff member said, "I will ask their (people's) opinion on what they want to do and how they want their life to be. It's important they know they can talk to any one of us."

People's rights to privacy and dignity were supported. One person said, "They leave me alone when I want them to and knock on my door before they come in, they always ask to come in." Staff understood the importance of respecting people's dignity and privacy when they supported them.

Most people at the home were being supported to move onto independent living. Two people we spoke with told us they were working towards moving into their own flats. Staff had spoken with them about this and they were clear on what they had to do and the goals they had to achieve to enable this to happen.

Is the service responsive?

Our findings

At this inspection, people continued to receive care and support that was responsive to their needs. The rating continues to be Good.

People's care and support was personal to them and their individual needs. One person told us they felt their emotional wellbeing had improved since they had been living at Sunnydale. They put this down to the fact that staff understood the support they needed and took the time to talk with them when they felt anxious or frustrated.

People were supported by staff to complete the goals they needed to, in order to move onto more independent living. One person told us they were being supported to improve their budgeting and the managers helped them with this. Other goals could include cleaning, cooking and doing their own laundry. The deputy and registered manager worked with people to identify their goals and kept these under constant review. The registered manager told us a new sector wide resource had recently been introduced, which had started to be used with good effect. The resource examines key areas, which look at how staff can support people with their mental wellbeing and help them to manage their behaviours. People confirmed that other healthcare professionals, such as their social workers, were included in reviewing their care plans with them. Staff also had access to specialist support within the company, including behavioural and psychiatry support. This helped to ensure that care and support provided was responsive to any changes in people's needs.

People had the opportunity to raise concerns and give their feedback about the service through regular 'house meetings' and one to one meetings with their keyworker or one of the managers. One person told us that during house meetings they would talk about trips they wanted to do, what they wanted on the menu and if they wanted anything for the home or their own room. They said, "Staff are always asking how we are feeling and what can they do to make things better here."

People had access to an easy read complaints procedure, should they require this. The registered manager told us that during 'house meetings' people were asked if they had any complaints or if they wanted to talk a staff member about anything. The provider's complaints procedure ensured that any complaints received were investigated and responded to.

Is the service well-led?

Our findings

At this inspection, people continued to be cared for within a well-led, person-centred culture. The rating continues to be Good.

People continued to be involved in the running of the home and told us they felt able to talk openly with the managers at the home. People were encouraged to become involved in all aspects of the home including cooking, cleaning and the gardens. People had requested improvements to the gardens and decoration and these projects were underway. One person said, "[Registered manager's name] listens to what we want and does something about it." People were involved in interviewing potential new staff and asked the questions which were important to them.

Comments about the registered manager were positive with regard to improvements they had made to the home. One staff member said, "I can't fault them. They have improved the team morale and have employed staff who know what they're doing. They roll up their sleeves and help out when needed." Staff told us they felt supported by the registered manager and got clear direction from them on what was expected from them. They told us the registered manager instilled the values of the organisation into them. One staff member said, "We give everyone a safe environment to live in and give them the skills to move on and into their own flats."

The provider had access to reports and audits through an internal computer system. Monthly senior management meetings, regional manager visits and audits completed at the home all contributed to monitoring and assessing the quality of the service provided. The registered manager told us they felt supported in their role by the provider and their line manager. The provider had also supported them in driving improvement within the home and agreeing future plans for development of the staff. Since our last inspection, improvement had been made to training, records and the development of staff. A new role of medicines officer had been created and staff had been given specific responsibilities within the home.

A registered manager was in post and was present for the inspection. They registered with us in February 2017 and understood their regulatory responsibilities with regard to keeping us informed of specific incidents at the home. A registered manager is a person who has registered with the Care Quality Commission 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.