

Precious Homes Limited

Precious Homes Hertfordshire

Inspection report

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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

Precious Homes Hertfordshire is a service providing personal care to fifteen people living with a learning disability, autism, mental health needs and sensory impairments at the time of the inspection. People have their own separate flats and shared communal areas within the main building. The service can support up to fifteen people and is a large detached two storey building.

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

People using the service received planned and co-ordinated person-centred support that is appropriate and inclusive for them. The registered manager and staff at Precious Homes Hertfordshire should be congratulated on providing a service that is both stimulating and diverse to people who have a range of complex and challenging needs. The atmosphere throughout this inspection was found to be inclusive, welcoming and professional.

Some people who lived at the home were able to communicate verbally but for people who were unable to speak with us we observed staff support them with a range of communication aids. These included sign language and interpreting people's body language with regards to meeting their needs and wishes.

People showed they were happy living at Precious Homes Hertfordshire and that they felt safe and comfortable with the staff team. One person said, "This my home and I like that they support my independence and let me take some risks that means I can go out and about, but they always check in on me to see that I am safe."

Staff were kind and caring and knew each person well. Staff felt they received good support and enjoyed working at the service. Staff had a range of expertise and skills to support people in the way they wanted. Staff received training, supervision, guidance and support so that they could do their job well. Staff respected people's privacy and dignity and encouraged people's independence.

Systems were in place to manage risks and keep people safe from avoidable harm. Medication was well managed. Staff followed good practice guidelines to prevent the spread of infection. The staff looked for ways to continually make improvements, worked well with external professionals and ensured that people were part of their local community. People were supported to be as active as possible.

Staff supported people to have maximum choice and control of their lives and staff supported them in the

least restrictive way possible; the policies and systems in the service supported this practice.

Audits were carried out to monitor the service and address any improvements required. The registered manager notified the CQC of incidents that they were legally obliged to.

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

Rating at last inspection

The last rating for this service was Good (published 24 November 2016).

Why we inspected

This was a planned inspection based on the rating at the last inspection.

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.

Precious Homes Hertfordshire

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

One inspector and one assistant inspector carried out this inspection.

Service and service type

Precious Homes Hertfordshire 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 reviewed information we held about the service, including the notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally obliged to send us within required timescales.

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.

During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with nine members of staff including the registered manager, deputy manager and care workers.

We reviewed a range of records. This included two people's care records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including audits and training records were also reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance records. We spoke with one professional who visits 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 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 safeguarded from abuse and staff were able to describe the process they would take to report concerns.
- Records showed that where issues had been raised they were appropriately reported to safeguarding authorities and investigated.
- People told us they felt safe. One person told us, "Yes definitely feel safe here, other service users are friendly as well as the staff, there is always someone close by." A relative told us, "I never worry about (Name's) safety, all the staff are very professional and competent." Another person we spoke with said, "Yes, I do feel safe, when the staff are working with me, it makes me feel safe."

Assessing risk, safety monitoring and management

- The registered manager had assessed all potential risks to people and had put clear guidance in place so that staff knew how to manage these. The assessments were personalised and ensured that staff supported each person to take risks in a safe way. For example, one person had a risk assessment in place for accessing the community independently. We saw these risk assessments had all been updated within the past six months and contained detailed information on their road safety awareness, the triggers to look for and the control measures in place to reduce the risk of harm to the person.
- Staff undertook regular checks of equipment in the service to ensure that it was safe to use. Staff had fire safety awareness training and knew how to keep the people and themselves safe. We spoke with one newly appointed staff member who confirmed that they had been provided with fire awareness training when they first commenced working at the home. They said, "I make sure I am fully aware of the fire procedure and where all the call points and any updates or changes to the system, so I can act quickly and without hesitation. We also have fire drills and refresher fire training updates. "
- During the second day of our inspection we were able to observe an unannounced fire drill which we found was carried out with precision and people we supported by staff who were both calm and organised throughout.

Staffing and recruitment

- The registered manager monitored staffing levels to ensure people received support to meet their needs.
- Staff felt that staffing levels were appropriate, and that they had time to provide safe and caring support. The registered manager explained that some people required additional support at key times of the day, for example when accessing the community. We saw from the rotas that there were a range of additional staff provided to support this.
- On the day of the inspection there were a total of 33 staff to support 15 people. This meant that people who used the service had ample opportunity to enjoy and take part a range of daily life activities both within the service and also in the local community.

- The provider's recruitment policy ensured as far as possible that new staff were suitable to work in the home. This included obtaining references and a Disclosure and Barring Service check.

Using medicines safely

- Staff managed medicines safely and gave people their medicines as prescribed. Detailed protocols were in place for medicines given when required. One person we spoke with told us "I take epilepsy medicines and staff help me with this, they are medicine trained, they remind me at what time I need to take it."
- Medicines were stored safely, and staff audited medicines weekly. Staff had an annual competency check to ensure they administered medicines in line with the prescribed instructions and the providers policy.
- We reviewed a risk assessment for a person who was self-medicating. This record contained the person's assessment of need, the description of each medicine and the side effects, the control measures in place to ensure the person was protected from harm and the named person responsible for supporting the person and a review date.

Preventing and controlling infection

- Staff received infection control training and had access to gloves and aprons.
- The premises were clean and tidy and we saw staff applying infection control principles, such as encouraging hand washing, during the inspection.

Learning lessons when things go wrong

- Records showed accidents and incidents were recorded in detail and appropriate action had been taken as a result of all incidents.
- The registered manager reviewed all accidents and incidents and made recommendations for future practice. The PIR stated 'Following incidents, families are informed of what happened and what we are doing to make things better. They are kept updated if the outcome is not known immediately. We are open and honest about what we did wrong and we re-enforce that we are learning from this. We complete learning outcomes following safeguarding incidents. And all incidents are fed back to the support plan to ensure that there are clear records of improving our practices.'

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

- A detailed assessment of people's support needs was carried out before they moved into the service. People, relatives and external professionals were involved in this to ensure appropriate support was available.
- Staff followed guidance and advice from external professionals to ensure people received appropriate support.

Staff support: induction, training, skills and experience

- Staff received training to ensure they had the knowledge and skills to provide effective support and spoke positively about this. One member of staff told us, "The training here is excellent, any additional training you ask for is provided along with all the mandatory training we have to do. I particularly enjoyed the Mental Capacity Training and Safeguarding. The manager will often discuss training practices with us when we are working together as a way of learning in an informal way as well as classroom training."
- Newly recruited staff completed an induction. This included observing experienced staff and completing the Care Certificate training. One newly appointed member of staff told us, "I felt confident about my role primarily because of the thorough induction I had with the senior staff; and the managers have been excellent in supporting me through this process."
- Staff were supported with regular supervisions and annual appraisals. These monitored staff welfare, knowledge and skills.

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

- Two members of staff told us how they supported one person to make healthy choices with regards to their diet.
- People's weight was monitored monthly to ensure they maintained a healthy weight.
- People received effective support with eating and drinking. People's dietary needs and preferences were clearly recorded and followed. One person told us, "I do my shopping online, I cook myself and my favourite dish is Chicken Chat. I'm a wicked cook, (staff name) will support me do this every week." Another person told us, "I do my own shopping online and do this independently. I will ask for help when the total of the shopping comes to a lot of money and I will ask staff what they think and ask for a bit of help in deciding what to do and the staff will then suggest alternatives that are suitable and slightly cheaper for instance."
- Staff involved people in planning and preparing meals to help maintain and develop their independence.

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

- Staff worked closely with a number of other services so that people received effective care and support. This included the community mental health and learning disability services.
- Staff involved other healthcare professionals to support people to maintain their health. These included the GP, community nursing team, as well as specialists relevant to people's health conditions. One person told us, "Staff go with me, doctors just down the road, we can walk into the town to the dentist. I'll get a reminder and I can make an appointment myself. I can check my availability in my diary."
- Advice given by healthcare professionals was recorded in people's care records and linked to people's care plans. Staff followed this advice well.

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

- People's rooms were personalised to their own taste and information seen with people's care plans confirmed that they had been involved in choosing their own colour schemes and how they wished their room to be decorated. One person was happy to show us their flat which had been decorated in bright colours with a variety of personal items displayed which created a very homely and personalised environment.
- The service was free from clutter and all communal areas were of a good size and could be fully and freely accessed if people required the use of specialist equipment.

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Mental Capacity Assessments had been carried out to determine what decisions people could and could not make for themselves. We reviewed four capacity assessments and all documents were completed accurately and with detailed information.
- Where decisions had been made in people's best interests, these were clearly documented and involved the person so they were informed of why staff made certain decisions for them. The PIR states 'If the person does not have the capacity to consent, we have a Mental Capacity Assessment in place to evidence their lack of capacity and we would require a best interest decision to be made in regards of a specific decision.'
- People were given choice about how they liked their care and treatment to be given and we observed staff gave people choice.
- Staff had an understanding of the principles of the MCA and how it applied to the care they provided for people.

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 told us they liked living at Precious Homes Hertfordshire. Comments included, " I love living here. Yeah, it's good here, staff are awesome, it's an amazing place, it feels like home. I'm an outdoorsy person and go out with other staff on bikes." Another person we spoke with told us, "The manager and all the staff are the best, they go that extra mile to help me and understand my frustrations."
- Some people who lived at the service did not use words to communicate. We saw that they were happy and had good relationships with the staff from the positive body language used, for example people smiling and holding hands with staff members. This meant that people felt comfortable with the staff and relaxed in their company.
- Staff treated people equally and without discrimination. We saw that equality and diversity training was provided as part of mandatory training. We also saw that that this topic was included as part of the Care Certificate which all staff have to work towards when they commence employment at the service.
- Staff considered people's protected characteristics under the Equality Act 2010. These included religion, race and sexual orientation and they supported people to have their diverse needs met.

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

- People were fully involved in making decisions about their care and support.
- Staff knew people well and knew people's likes, dislikes and how they preferred to be supported. One person said, "Staff encourage me to wash my clothes and clean my flat so I can keep my independence."
- Where appropriate, people had access to advocacy services. An advocate is independent and supports a person to express their views.

Respecting and promoting people's privacy, dignity and independence

- People's personal information was kept confidential in the office.
- Staff fully respected and promoted people's privacy and dignity. Personal care was offered discreetly and carried out in private. Throughout this inspection we observed staff offered the people they supported the utmost respect and ensured they knocked on people's front doors before they entered their flats.
- Staff encouraged and supported people to do as much as they could for themselves. People were supported to carry out their household chores within their own flats. This also included support with the preparation of their meals, where possible.
- Staff supported people to maintain relationships with relatives and friends. The PIR states 'We do support people to stay in touch with their families by facilitating visit, either at Oster House or supporting them to the family preferred location. Staff provide as much as privacy as the family request this can be when they visit

the individual flat or if they wish to sit in the communal area, while ensuring that the person we support and those around them are safe. We follow the person we support direction in regards of family involvement, but also the family request. Some families do not want to be involved or the individual does not want the family members involved.'

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

- Each person had an electronic care plan that was person-centred and written in the first person, which detailed their preferences about the way they wanted staff to give them care and support. The person and their keyworker reviewed their support plan at least monthly. For example, we saw each care plan had a section entitled 'How I was involved with my plan'. This section provided evidence that the person themselves had been involved and consulted about their plan of care.
- Care plans also contained information and guidelines to assist staff on how best to support people when their behaviour may be challenging, with clear and simple techniques that help ensure these situations are managed in a calm and non-confrontational way in order to reduce the risk of harm to the person themselves and staff members.
- People invited their relatives to annual reviews of their care and support if this is what they chose to do.
- The registered manager gave us several examples of how the support provided by the staff had been in response to people's needs. This included ensuring that all staff received Positive Behaviour Training to support people's individual needs.

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.

- Information was given to people in an easy read format to help aid their understanding.

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

- Staff encouraged people to be as active as possible, both within and outside the home. Some people who lived at the service was able to go out independently. They told us that this gave them freedom to enjoy social and leisure activities within the local community which they considered very important for their health and well-being. We saw that individual activity planners were produced in a pictorial format, when appropriate.
- Staff supported people to do a range of activities. One person told us, "I like movie night in (Oster House) and having pyjama evenings with my friend who also lives here." Another person told us that they had enjoyed a recent trip to Disneyland and had brought back a gift for one of their friends. We saw that people were offered a diverse range of activities which included football, baking, art and craft, shopping, bowling

and aerobics.

- People were encouraged and assisted to maintain and remember relationships that were important to them. For example, staying in touch with friends and family. One person told us how they had applied for a part time job via their computer through a recruitment agency, attended an interview and was successful in securing the job, which they told us they "thoroughly enjoyed and this made them feel part of the community."
- The registered manager and staff had also created the role of an 'Ambassador' within the home that had enabled a person to be involved in tasks such as delivering the post, shredding documents and going into the local town to purchase office stationary. One staff member told us that this gave the person a great sense of wellbeing and pride in being involved and contributing to the running of the home.

Improving care quality in response to complaints or concerns

- The provider had a complaints process in place. We saw that this had also been produced in an easy read format that ensured everyone living at Precious Homes Hertfordshire was fully able to comprehend the policy, if they wanted to make a complaint about the service provided.
- People told us they had no complaints, but they were confident the registered manager would deal with anything they raised. One person told us, "I would go straight to [Name] and complain." Another person said, "Talk to [Registered Manager] although I have nothing to complain about , but I know that [Name] is there for me."

End of life care and support

- All staff were provided with training and knowledge about end of life care.
- No one at the time of this inspection was receiving end of life care however, people's end of life wishes could be recorded where people were happy to discuss this.
- Staff said that people receiving end of life care could stay at the home if this was their wish and they were able to meet their needs.

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 and 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.

- There was a clear ethos at the service to promote people's independence.
- Our conversations with the registered manager and the staff demonstrated they understood person centred care and applied this in practice.
- The registered manager and senior staff completed weekly, monthly and annual audits across all areas of the service to monitor the quality of the service being delivered.
- Staff were positive about the registered manager and described them as approachable and professional. One staff member told us, "[Registered Manager] is one of us and always works along the support staff and is not one of those managers who just sits in the office." Another staff member said, "The ethos of the staff team is one of unity and cohesion. We pull together and support each other all the way and the managers are at the helm to support us. This is quite a unique place where all staff feel they have an equal say in how the service runs, as well as the people we support of course."
- Staff were well supported in their role. Regular staff meetings were held and staff were aware of how they contributed to the performance of the service.
- The registered manager showed a good understanding of legislation, requirements and their responsibilities within the governance role.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The PIR stated; 'As a service we are open rigorous and constructive from all stake holders and there has been many examples of where we have responded positively and fed this back within the team but continued to have a holistic positive approach with the service users and external professionals.'
- The service worked in partnership with health and social care professionals who were involved in people's care. We spoke to one professionals who said that the service staff were keen to develop and work with their agency for the benefit of people living at the service.

Continuous learning and improving care

- The registered manager used audits and feedback to develop and improve the service and relayed this to their staff team. The PIR states 'The quality assurance is part of the business plan as it aims to improve that standard of service we provide to the individuals that meet the values of the company and the expectations of families, commissioners and regulators.'

- The service used knowledge of the wider care industry to learn when things had gone wrong and evaluate how to avoid the same concerns at Precious Homes Hertfordshire.