

Voyage 1 Limited

Strafford View

Inspection report

Doncaster Road
Hooton Roberts
Rotherham
S65 4PF

Tel: 07793616670

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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

Strafford View is a care home providing personal care and accommodation for adults with learning disabilities and Autistic Spectrum Disorders.

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.

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to seven people. Seven people were using the service. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

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

People were safeguarded against the risks of abuse or harm by staff who understood what to do to protect people. Risks to people were assessed and mitigated. Staff understood people's needs and preferences.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that 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.

Staff were safely recruited and supported in their role through training and supervision. There were enough staff to meet people's needs.

People were supported to access health professionals to promote good health and wellbeing. People received their medicines when they needed them from staff who had been trained and had their

competency checked. The home was clean and free from hazards.

The provider and management team carried out quality checks to ensure the service was of a good quality. When accidents or incidents occurred, they were analysed to ensure lessons were learnt. People's views and opinions of the service were sought and acted on.

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

Rating at last inspection

This service was registered with us on 18 March 2019 and this is the first inspection.

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.

Strafford View

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

Strafford View is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service about their experience of the care provided. We spoke with

five members of staff including the registered manager, deputy manager, senior care workers and care workers. We 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 a range of records. This included two people's care records and multiple medication 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 quality assurance information.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training and supervision data.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse as the provider had robust safeguarding systems in place.
- Staff were aware of how to recognise and respond to safeguarding concerns.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People living at Trafford View, and staff told us that people were safe. A person told us, "I feel safe here, it's a brand-new home, the staff look after me." A staff member said, "I have had to report concerns in other care settings, but not here, people are safe."
- People were safely supported and assessments of risk were in place. For example, risks from activities, health and the environment.
- People lived in an environment that was safe. Risk assessments had been carried out on the environment, including the risk of fire. Improvements had been carried out to the fire safety equipment recently and regular fire tests and evacuations took place.
- There were systems in place to monitor accidents and incidents. The provider and the registered manager oversaw this. The registered manager had planned to make adjustments to the monitoring systems, so it was easier to follow.
- The Registered Manager was responsive to improve the delivery of the service so it could continuously develop.

Staffing and recruitment

- People were supported by suitable and sufficient numbers of staff who had checks undertaken prior to starting their employment.
- Staffing levels were adapted to meet people's needs and included one to one support.
- Checks were completed prior to staff beginning employment. This provider ensured appropriate references and disclosure and barring service checks (DBS). A DBS would inform the service if a person had any criminal convictions which may prevent them from working with vulnerable adults.

Using medicines safely

- Staff were trained and assessed as competent to administer medicines.
- Medicines were safely stored in a locked room, within a locked cabinet. Temperatures were regularly taken to ensure medicines were stored at the correct temperature.
- One person told staff helped to ensure their medicines were received. They said, "I get my tablets when I need them. I can ask for pain killers if I need them but would only ask if I really needed them."
- Records of medicines administered were well maintained. There were no unexplained gaps and records

were audited regularly.

Preventing and controlling infection

- People lived in an environment that was clean and hygienic. Staff supported people to keep their bedrooms clean and tidy.
- Staff received training on infection control and understood the procedures they must follow to reduce the risk of infection. Equipment such as protective gloves, aprons and hand sanitisers were available for staff to use when needed.
- Additional information had been given to people to make them aware of the importance of hand washing and taking precautions not to spread infection in line with Government guidelines. One person who used signs to communicate showed us how they would do this.
- The kitchen and food preparation areas had been inspected by the Environmental Health department and had been rated good.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People's needs had been carefully assessed to make sure the service was right for them. Information was gathered from the person, their relatives and professionals who knew them well. A support plan was drawn up setting out the care and support the person needed.
- People support plans included information relating to the protected characteristics under the Equality Diversity and Human Rights Act (EDHR). People were provided care and support that ensured they were not discriminated against.
- Each person was involved in reviewing their support plan, as far as they wished or were able. Support plans provided detailed information about all areas of needs such as mobility or diet and nutrition. People received regular reviews of their support to check they were receiving the support they needed.
- The service applied the principles and values of Registering the Right Support to ensure that people who used the service lived a full as life and achieve the best outcomes, including maximising control, choice and independence in their lives.

Staff support: induction, training, skills and experience

- People received support from staff who had completed training to meet their needs effectively. The provider had ensured staff undertook training they had deemed as essential in areas such as safeguarding, health and safety and infection control. In addition, specialist training was provided to ensure staff were skilled to meet people's individual complex needs, such as supporting people with epilepsy.
- Staff said they felt supported, received regular supervision and attended team meetings to keep them updated with guidance for caring for people. This provided an opportunity for the team to work together to deliver effective care.
- Staff told us they received a thorough and detailed induction where they completed essential training and shadowed experienced staff until they were competent to lone work.

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

- People were supported to eat a balanced and nutritious diet. Staff understood each person's likes and dislikes and their dietary needs. People's dietary needs were set out in their support plan.
- People told us how they planned and cooked their meals and how they were involved in choosing the meal they wanted.
- People being offered a variety of lunch time meal choice. People told us they enjoyed the meals.

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

- People had a Health Action Plan (HAP). A HAP is a profile document which gives staff members and healthcare professionals guidance on how to support the person to remain healthy.
- Records confirmed people were supported to access a number of healthcare professionals for example, the G.P, dentist, optician. Where guidance had been given, this was then implemented into the support plan.
- Staff told us they provided verbal and written handovers to their colleagues. Documentation included detailed updates about people's health and wellbeing which meant staff were able to provide consistent support.

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

- The home was clean, bright and had a homely feel and suitable for people. One person said, " I love living here, we have nice meals and nice showers, it's like a brand-new home." And, "My bedroom is nicely decorated with curtains, pictures and nice views."
- People living at the home were all able to move freely around the home environment. People had personalised their bedrooms according to their taste. A person said, "I have chosen how I have my room."
- People had access to an activity room where they could take part in various arts and crafts and also had access to suitable outside space.

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.

- The registered manager and staff understood the MCA and knew how to support people who lacked the capacity to make specific decisions for themselves. Staff encouraged and supported people to make day to day decisions. Where decisions had been made in a person's best interests these were recorded.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- We saw interactions between people and staff that demonstrated warmth and kindness. A person said, "They are such lovely staff and carer's here."
- People engaged with staff in a way that showed they were comfortable with them and there was lots of smiles and laughter. People benefited from consistent staff who had worked with them for a long time and with who they had built a rapport.
- Staff had a good understanding of people's needs and what was important to them. A staff member said, "We are person centred here, it's about people being at the heart of the support. I would be happy for a member of my family to live here because I know they would be supported how I wanted them to be."
- The service had received a number of compliments and comments including; a professional delivering training to the staff wrote: 'I found [name] to be one of the most professional support workers I have come across while travelling the country training our teams. I found their knowledge of the subject matter and devotion to the people we support inspirational and I've had a great time teaching today.'

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People confirmed they were supported to make decisions about the support they received. For example, one person told us, "I can make my own choices."
- People told us there were regular house meetings which they could attend if they chose to.
- Staff were skilful communicating with people and understanding their ways of communication. Peoples care plans included detailed assessments of verbal and nonverbal communication.
- Staff had good knowledge on equality and diversity. Staff and were respectful of people's privacy and dignity.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. 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 were involved in the planning of their support. People we spoke with knew care records were kept and had been asked if they agreed to how they were being supported.
- Support plans described people's abilities with aspects of their care and the support needed from staff to meet their needs. The support plans reflected people's current needs and were regularly updated when there was a change of need.
- Staff knew each person well and took appropriate actions when people displayed agitation or showed they were upset.

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.

- People were given information in a format suited to their individual communication needs.
- Support plan's gave great detail on the specific communication needs of people, for example the subtleties of the use of tone of voice used had helped to reduce instances of challenging behaviour.

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 had the option to plan their day as they wished. Staff gave people time to communicate their wishes and did not rush them.
- Although people were encouraged to take part in some scheduled activities, we saw missed opportunities for people to be more actively involved in tasks in the home such as cooking. We discussed this with the registered manager who has made plans to ensure active support is embedded into practice.
- Staff recognised the importance of people's relationships with their family and friends and promoted and supported these contacts when required.

Improving care quality in response to complaints or concerns

- The provider has a robust complaints policy and procedure in place.
- People told us they knew how to make a complaint. Some people told us they would speak with the registered manager, others said they would tell a member of staff or a relative. They all said they were confident their complaints would be listened to and acted upon. A member of staff told us, "Staff really care and would fight for what people want."

End of life care and support

- People were supported to consider wishes for their end of life care. Some people had stipulated their funeral arrangements. For example, their wishes for music and the people to be present.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People were supported in a service where the provider instilled caring values.
- People and staff spoke highly of the registered manager. A person said, "[Registered manager] listens and sorts things out." And staff said, "One staff said, "This is a good care setting. We are lucky we have a good staff team here we are diverse and are supported well."
- Overall staff said team moral was good and staff were committed to team work with colleagues.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager promoted the ethos of honesty, and commitment to learning from mistakes if things had gone wrong, or where improvements could be made.
- The provider was aware of their responsibility to be open and honest when something had gone wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There were visible leadership and management support available to staff. Staff told us they knew who to go to for guidance and direction and they felt well supported. The registered manager was available during the day to give support and direction to staff.
- An on-call system was available, so all staff could contact a manager at any time of the day or night for advice or guidance.
- The management team was aware of their responsibilities to notify CQC about other bodies about safeguarding concerns, and accidents resulting in injuries.
- Regular audits of the service were carried out to ensure standards were being delivered and to drive improvements.
- Audits covered, for example, medicines management, support plans, and risk management.
- Records confirmed audits undertaken were done so in line with good practice and records were kept up to date.

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

- People's views were gathered from feedback forms sent out to relatives and stakeholders. The service

received positive responses from people, relative and external professionals.

- Staff surveys were completed to address where improvements could be made and to give staff a voice on how the service was delivered.
- The registered manager worked in partnership with other agencies, such as the local commissioners who conducted their own reviews of the service.
- The service had close links and good working relationships with a variety of professionals where relationship working had been developed to enable effective coordinated care and support for people.