

# Home Group Limited

# Aviary House

## 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

What life is like for people using this service:

People who used the service continued to receive good care.

People felt safe and were protected from avoidable harm. Risks associated with people's care and support were managed well. Staff and the registered manager understood their responsibilities to keep people safe. The building was clean, and staff followed good infection control practices. Plans were in place to safely evacuate the building in the event of an emergency. Enough staff were employed to meet people's needs and recruitment procedures minimised, as far as possible, the risks to people's safety. Medicines were managed safely by the service. A system to record accidents and incidents that occurred was in place. Lessons were learnt when things went wrong.

People's care, treatment and support continued to achieve good outcomes, promotes a good quality of life and is based on best available evidence. The service was working within the principles of the Mental Capacity Act. Staff received support and training to be effective in their roles. The staff team worked in partnership with other health and social care professionals to ensure people received the support they needed to maintain their well-being and health.

People were complimentary about the level of care shown by staff. People's dignity was maintained and their right to privacy was respected. People were supported to be independent. People maintained relationships that were important to them and were involved in the planning and review of their care.

People's needs were met through good organisation and delivery. People received personalised care and support specific to their needs and preferences. A system was in place to manage complaints about the service and people knew how to complain.

The service was consistently managed and well-led. People and their relatives spoke positively about the management team. Staff enjoyed their jobs and a staff recognition scheme was in place. The registered manager understood their responsibilities in relation to and the requirements of their registration. Audits and checks were completed to ensure the safety and quality of the service was maintained.

Rating at last inspection:

Good (The date last report published was 1 March 2016)

About the service: Aviary House is registered to provide care and accommodation and personal care and support for up to 28 people living with mental health conditions in Solihull, West Midlands. During our inspection 28 people were in receipt of care and support.

Why we inspected: We inspected the service because it was previously rated 'Good', and it was time for us to return to check whether the rating continued to be 'Good'.

Follow up: Going forward we will continue to monitor this service and plan to inspect in line with our reinspection schedule for those services rated Good.

## 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.

# Aviary House

## Detailed findings

### Background to this inspection

#### The 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.

#### Inspection team

One inspector, one assistant inspector and an expert by experience with knowledge of mental health services undertook this inspection. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Aviary House is registered to provide care and accommodation and personal care and support for up to 28 people living with mental health conditions. The service is provided from 28 flats within one shared building. On the day of our visit four flats were occupied by people in receipt of short-term care and accommodation. The remaining flats were occupied by people in receipt of a supported living service. All of these people were in receipt of personal care.

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

We gave the service one week's notice of our inspection visit because we needed to ensure people, managers and staff would be available to speak with us.

#### What we did

We used information the provider sent us in the Provider Information Return. (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

We looked at information we held about the service including statutory notifications, about important events. We also spoke with local authority commissioners who work to find appropriate care and support services for people and fund the care provided. They told us they were happy with the care and support provided to people.

We spoke with seven people during our visit, and one relative to gather their views on the service received. We used this information to form part of our judgements. We also spoke with the registered manager, the operations manager, one support coordinator, a support worker and the referrals worker.

We reviewed a range of records. This included three people's care records, staff training records, compliments and complaints and the providers quality assurance systems. We also reviewed two staff files to check staff had been trained and recruited safely.

# Is the service safe?

## Our findings

People continued to be safe and protected from avoidable harm.

### Systems and processes

- Everyone we spoke with told us they felt safe. Comments included, "I feel very safe living here, the building is very secure, we have 24-hour support," and, "I feel 100% safe, it's like a big extended family."
- Effective safeguarding systems were in place to keep people as safe as possible. Staff had completed safeguarding adults training and demonstrated a good understanding of their responsibilities to report if they witnessed or had an allegation of abuse reported to them.
- The registered manager knew how to correctly report safeguarding concerns to the local authority which meant any allegations of abuse could be investigated.

### Assessing risk, safety monitoring and management

- Risks associated with people's health, safety and welfare had been identified. For example, one person displayed behaviours which could cause themselves harm. The person's risk management plan provided staff with the up to date information they needed to provide care and support safely to reduce this risk.
- Our discussions with staff assured us they knew how to minimise and manage known risks.
- The environment and equipment were safe and well maintained. Emergency plans were in place and people know how to safely evacuate the building in the event of an emergency.

### Staffing levels

- People confirmed there was always enough staff on duty to meet their needs.
- Staff told us there was always enough of them to provide the care and support people required. One staff member commented, "We get our rotas in advance and we get enough time to provide care."
- The provider's recruitment procedures minimised, as far as possible, the risks to people's safety. Staff confirmed they were not able to start work at the service until the required checks had been completed to ensure they were suitable to work with people who used the service.

### Using medicines safely

- People confirmed they received their medicines when they needed them. One person said, "My medication is given by staff at regular times each day." A relative commented, "The staff make sure (Person) takes all their medication which is why she is doing so well."
- Medicines were managed and administered safely by the service. A series of effective medicine audits and checks took place. This meant any errors were promptly identified and addressed.
- Staff were trained and deemed competent by the registered manager before they administered people's medicines.
- People were supported by staff to gain the skills and knowledge to administer their own medicines which

promoted their independence.

### Preventing and controlling infection

- People told us staff followed good infection control practices when they provided their care and support.
- Communal areas of the building were clean.
- Staff had received training which supported them to understand their responsibilities in relation to infection control which protected people from the risks of infection.

### Learning lessons when things go wrong

- A system to record accidents and incidents that occurred was in place. The registered manager regularly reviewed completed records to identify any patterns or trends, so appropriate action could be taken to reduce the likelihood of them happening again.
- When things had gone wrong within the organisation the provider had responded appropriately. They used incidents as a learning opportunity to develop services across the organisation.



# Is the service effective?

## Our findings

People's care, treatment and support continued to achieve good outcomes, promoted a good quality of life and was based on best available evidence.

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

- The provider's assessment process ensured people's needs and expectations could be met. The referral worker said, "We invite people to visit or stay for a while. We adapt the process to suit a person's needs."
- People told us they were supported by staff to achieve their desired 'goals'.
- Outcomes were clearly recorded, and progress was monitored and regularly reviewed which supported a good quality life.

Ensuring consent to care and treatment in line with law and guidance

- We checked and found the service was working within the principles of the Mental Capacity Act (2005).
- People were empowered to make their own decisions and were provided with the information they needed to support decision making.
- Records showed people worked in partnership with the staff to create their care and support plans.
- People told us staff always gained their consent before they provided any assistance.

Staff skills, knowledge and experience

- New staff received the support and training they needed to be effective in their roles when they started work at the service. This included completion of the Care Certificate which sets the standard for the skills, knowledge, values and behaviours expected for health and social care workers.
- Staff spoke positively about their training and confirmed they had opportunities to complete nationally recognised health and social care qualifications. One said, "Training is great here. I'm doing my RQF 3 which helps me to continually develop my knowledge."
- The provider had ensured staff had completed the training they needed to meet people's individual needs.
- Staff received individual support through regular one to one meetings called 'brilliant conversations' to help guide them with their work. Staff told us this made them feel supported to continually improve their working practices.

Supporting people to eat and drink enough with choice in a balanced diet

- People received the support they needed to meet their nutritional needs if this was part of their planned care. One person said, "Anything you need help with the staff will do for you including shopping and cooking."
- Staff knew what people liked to eat and drink. They explained how they encouraged people to make healthy food choices to maintain their health.

## Supporting healthier lives and access to healthcare

- People told us they made their own health appointments, but staff would support them with this if they needed it, including attendance at appointments.
- The staff team worked in partnership and maintained links with other health and social care professionals such as community psychiatric nurses. This meant people received the support they needed to maintain their well-being and health.
- In March 2018 the service won an award from a local health and social care partnership. The award recognised their commitment to collaborative partnership working to benefit people with personality disorders.

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

- People had been involved in decisions about how the communal areas were decorated.
- The building was accessible to all people.

# Is the service caring?

## Our findings

People told us they continued to receive good care. The service involved and treated people with compassion, kindness, dignity and respect.

### Ensuring people are well treated and supported

- People were complimentary about the level of care shown by staff. One person said, "I am always treated with kindness." A relative told commented, "We are very happy with the care given. (Person) has very caring staff around her."
- The provider's PIR stated, 'A person first approach is cascaded throughout the company.' Our discussions with staff assured us this approach had been embedded. One staff member said, "People come first. This is the first place I have worked where I have seen person centred care delivered. I would be happy for my relatives to live here."
- People were supported to maintain relationships that were important to them. A staff member said, "We support one customer to dial the telephone number and encourage them to speak so they don't lose touch."
- Individuality and diversity was recognised. Staff had completed equality and diversity training and through discussion demonstrated they ensured people's rights were upheld.
- People had opportunities to get to know their staff. For example, staff had shared information about themselves and 'staff profiles' had been created.

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

- People were involved in the planning and review of their care. One person said, "I have a link worker and we have meetings all the time to see how things are going for me." A relative said, "The staff keep me informed. I know [person] has a care plan and that staff speak with her regularly about her care."
- The service signposted people to advocacy services if they required advice and support to express their views and make decisions.

### Respecting and promoting people's privacy, dignity and independence

- People's dignity was maintained and their right to privacy was respected. One person said, "Staff treat me with respect and observe my dignity, no-one's ever been rude to me." They added, "I get enough privacy, but I know the staff are always there for me when I need them."
- People were supported to be independent. A staff member said, "I encourage people to do as much for themselves as they can. Some people just need a prompt."
- People's personal information was kept confidential.

## Is the service responsive?

### Our findings

People's needs were met through good organisation and delivery. People received personalised care and support specific to their needs and preferences.

#### Personalised care

- Staff were responsive to people's needs. They had supported one person to access a specialist hairdresser who understood how to cut and style the person's hair. The person told us this made them 'feel good.' Two other people were engaged to be married and the service had supported them to celebrate this by arranging an overnight stay in a hotel.
- Staff knew people well. They explained because they cared for the same people they had learnt what was important to them from their perspective. One person said, "The staff know me, they are able to settle me down when I am feeling upset or anxious."
- Care records were up to date and were written in a personalised way. Records included detailed information about people's likes, dislikes and routines.
- Staff told us communication was good at the service. They received a handover of information when they arrived for their shift. This meant they had up to date information to provide the care people needed.
- People chose how to spend their time and had access to planned activities. Social activities were available at the service such as, a weekly 'boot camp' keep fit session which people told us they enjoyed.
- People received information about the service in a way they could understand. This was in line with the 'Accessible Information Standard' which is a legal requirement for all provider's to ensure people with a disability or sensory loss can access and understand the information they are given.

#### Improving care quality in response to complaints or concerns

- A system was in place to manage complaints about the service and people knew how to complain. One person said, "We were given information about formal complaints, but we would speak to staff or the manager about any concerns we have."
- The registered manager explained they used complaints to continually review the service and to drive forward improvement.

# Is the service well-led?

## Our findings

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Leadership and management

- People and their relatives spoke positively about the provider's management team. Comments included, "The manager is very good to me, she's an excellent manager," and, "The managers are brilliant." Staff enjoyed working at the service and described their managers as 'approachable' and 'really great people.'
- Staff attended regular team meetings which gave them opportunities to share good practice, discuss changes and any areas for improvement.
- Regular management meetings took place which provided opportunities for the managers to check the service was being run in line with the values of the service.
- Staff felt supported by the 'on call system' in place which meant they had access to a member of the management team outside of normal office hours to provide them with advice and guidance.
- A staff recognition scheme was in place and staff commitment to the service was celebrated.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager understood their responsibilities in relation to and the requirements of their registration. We had received notifications from the service as required. We found the provider's latest rating was displayed on their website which is a legal requirement.
- Staff demonstrated they understood their roles and responsibilities and what was expected of them.

### Engaging and involving people using the service, the public and staff

- The registered manager demonstrated their commitment to providing high-quality, person-centred care by engaging with everyone using the service and stakeholders.
- Different methods were used to gather feedback from people on the service they received. We found action was taken in response to the feedback obtained. During a recent tenant's meeting people had requested 'do not disturb' signs to display on their front doors. We saw these were in use during our visit.
- People received frequent newsletters which kept them up to date with what was happening in the service and within the provider group.
- People were involved in the planning and running of the service. For example, they had been encouraged to contribute to the customer involvement plan which outlined the provider's future plans and vision for the service.
- The service was active in their local community. They worked in partnership with schools, and local places of worship to raise awareness of mental health issues.
- People and staff told us the registered manager had an 'open door' policy and they were available when they needed them.

## Continuous learning and improving care

- The management team continued to have effective oversight of what was happening in the service. Audits and checks were completed to ensure the safety and quality of the service was maintained.
- Strong emphasis was placed on listening and involving people to continually develop and improve the service.
- The registered manager was continually reviewing and learning where possible. For example, they had led on implementing a new medication audit which was used throughout the organisation.