

New Directions Flexible Social Care Solutions Ltd

Hill End Lane

Inspection report

35 - 37 Hill End Lane
St Albans
Hertfordshire
AL4 0TX

Tel: 01727811906

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10 July 2018

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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

Hill End Lane provides accommodation, care and support for up to seven males with a learning disability and or a mental health diagnosis. At the time of our inspection there were six people living at the service.

At the last inspection on 05 November 2016, the service was rated Good.

At this inspection we found the service remained Good.

The service has a registered manager. 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.

People felt safe being supported at the service. Staff were knowledgeable about how to protect people from harm. They had received effective safeguarding training.

There were sufficient numbers of staff deployed to meet people's needs when required. Safe recruitment processes were in place to help ensure that staff were suitable to work in this type of service.

Staff had received training and an ongoing support to help with their development. Staff were positive about the training and support they received.

People were involved in the development and review of their care and how it was provided. People had detailed care plans which clearly documented their individual needs, preferences and choices. Risks to people's health, safety and wellbeing had been assessed and there were effective risk management plans in place which mitigated risk. All care plans and risk assessments had been regularly reviewed to ensure that they were reflective of people's current needs.

People were supported to make decisions about their care and support. Decisions made on behalf of people were in line with the principles of the Mental Capacity Act 2005 (MCA) and the associated Deprivation of Liberty Safeguards (DoLS). Consent was gained from people before any support was provided.

People were supported to access a range of health care professionals to help maintain their health and wellbeing. Care plans detailed people's support needs in relation to their health. There were effective systems in place for the safe storage and management of medicine and regular audits were completed. People received their medicines as prescribed.

People had positive relationships with staff who supported them. Staff were supportive and respectful. People's privacy and dignity was maintained and respected. Staff knew people's needs and preferences and provided personalised support. People were supported to participate in meaningful activities and hobbies

that were of interest to them.

People and staff found the registered manager supportive and approachable and were very positive about how they managed the service. People felt listened to and said that staff were responsive to any concerns they raised. Quality monitoring systems and processes were used effectively to make improvements when required.

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 remains Good.

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

Hill End Lane

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 was planned to check 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.

We carried out this inspection on the 6 and 10 July 2018. The inspection was unannounced and was undertaken by one inspector.

Before the inspection, reviewed all the information we have in relation to this service. The provider had 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 other information we have relating to the service. We received feedback from commissioners, and reviewed notifications. A notification is information about important events which the provider is required to send us by law. We found that no recent concerns had been raised.

During the inspection we spoke with two people who lived at the service, two care practitioners, the recruitment administrator and the registered manager.

We observed interactions between staff and the people living at the service. We reviewed care records and risk management plans for two people who lived at the service, and checked other records relating to people's support plans which included medicines administration records to ensure these were accurate and completed correctly. We looked at two staff recruitment files and the training records for all the staff employed at the service to ensure that staff training was up to date. We also reviewed additional information on how the quality of the service was monitored and managed.

Is the service safe?

Our findings

Staff had been trained in how to safeguard people from harm and were knowledgeable about the potential risks and signs of abuse. One person told us, "I definitely feel safe here the staff help me to feel safe and it's a good environment as well, we have CCTV in all the communal areas." One member of staff told us, "I have had safeguarding training and would have no hesitation reporting any concerns. I know the registered manager would take any concerns seriously and would address them. We discuss safeguarding regularly so everybody is reminded." We saw safeguarding information on a poster with relevant contact details, signposting staff and people who to contact should they have any concerns.

Individual risks to people's health, were assessed and kept under regular review to take account of changing needs and circumstances. For example, risk assessments had been completed in respect of people's mental health and their behaviours along with likely triggers and what could be done to help manage these episodes. This helped staff identify early detection signs and help the person through early intervention.

Safe and effective recruitment practices were followed to help make sure that staff were of good character and suitable to work in this type of service. There was a robust process in place for the recruitment of staff. This included completion an application form, provide proof of identity, having a minimum of two references taken up and a disclosure and barring check (DBS). We saw from recruitment records that gaps in employment were explored along with the right to work in the UK.

There were sufficient numbers of staff deployed to meet people's needs. People were supported in a timely way. One person told us, "There is always enough staff and we have allocated support times with our keyworker, it is never a problem if you ask for support they are there for you."

There were suitable arrangements for the safe storage, management and disposal of medicines and people were supported to take their medicines by suitably trained staff who had their competency assessed. We checked a random sample of medicines and found they had been safely administered to people at the correct time. Medicine administration records (MAR) were completed correctly. We saw that the MAR charts had a photo of the person and any known allergies were recorded on the front of the record to alert staff. Regular audits were undertaken to ensure any errors were quickly identified.

Accident and incidents were recorded and this information was analysed to help with learning from such events and to help to minimise the risk of a reoccurrence. For example, when people went out in the community they were encouraged to let staff know what time they were expected back to ensure their continued safety. If they did not return or contact staff the alarm would be raised as potentially a 'missing' person. We noted that several 'missing people' incidents had occurred and staff had put measures in place to help keep people safe, such as ensuring mobile phones were fully charged to enable staff to keep in contact with people.

The home was well maintained to reduce the risk or spread of infection. Regular audits were completed to help ensure that hygiene standards were maintained throughout the home.

Is the service effective?

Our findings

People were supported by appropriately skilled and knowledgeable staff. Staff told us, and records confirmed that they received the training and support they needed to carry out their role effectively. A staff member told us, "We are well supported and the registered manager is very approachable. We have regular training and updates." New staff completed an induction which included spending time on shift with the people they would be supporting. One staff member told us, "We had an opportunity to learn about the vision and ethos of the service." Staff were also supported to complete specialist training that was of interest to them.

Staff were well supported by the registered manager. We saw that there were regular team meetings held and staff were able to contribute to the agenda if they wanted to discuss anything. In addition, staff had individual one to one supervision meetings with their line manager which provided them with an opportunity to discuss their personal development or to identify any additional training that was required. One staff member told us, "We are well supported we can always go and speak to the registered manager if we need to discuss anything, we don't have to wait for a team meeting or supervision."

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 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). People using the service had their capacity to make decisions and consent to their care assessed appropriately under the MCA principles. Staff demonstrated they understood MCA and DoLS and how this applied to the people they supported.

Staff obtained people's consent before assisting them and were aware of the MCA and the steps that needed to be followed to protect people's best interests.

People told us that they were supported to have a balanced diet and they chose what and when they ate and drank. One person told us, "The staff support me with cooking, but I can do most of it myself."

People's day to day health needs were met in a timely way and they had access to health care and social care professionals when necessary. For example, the service worked closely with the community mental health team (CMHT) and other health care professionals. People told us they were supported to attend medical and health appointments which included seeing their GP, dentists and specialist therapists when required.

Is the service caring?

Our findings

People told us that the staff were kind and caring. We observed that staff were caring and compassionate to the people they supported. One person told us, "They are lovely here, the staff are very nice and they are caring, I do feel well supported, sometimes it is the reassurance they give you." Another person told us, "I have always found the staff to be really good, I think they are all kind and my keyworker is very understanding."

People's support plans were person centred and their care was arranged around their individual needs. People were involved in making decisions about their care. People had set their own objectives and were supported to achieve these. They had access to the information technology (IT) system which supported their independence and enabled them to upload information when they wanted to.

We saw that care plans were very detailed and provided staff with all the information they required. Each care record contained a profile about the person which helped staff to understand about the person's life and journey, what was important to them and who was involved in their lives.

People had access to advocates if required. One person told us, "When I had some issues the staff here gave me details of an independent advocate who provided me with information and helped me to make informed decisions." We saw that details of advocates were placed on notice boards within the service, giving people the information to enable them to contact them independently if they wished.

Staff respected people's dignity and privacy and supported people as they wished, whilst encouraging them to remain as independent as possible. One staff member told us, "I treat people as adults and individuals, I respect people's wishes and I treat people how I would wish to be treated myself." We observed during our inspection that staff were mindful of people's privacy and they spoke quietly to people so that any personal conversations were not overheard.

Staff had developed positive and caring relationships with people they knew well. Staff spoken with were able to describe people's individual needs and wishes in detail. One staff member told us, "I have worked here for a few years now and have got to know people very well." People who used the service confirmed staff were kind and caring towards them and said, "Yes, they are very nice and really do care for us very well."

When speaking to staff about people's individual support staff spoke kindly about the people they supported. It was clear from conversations that staff knew about important things in people's lives and had taken time to get to know what made people happy and what made them sad so that they could really support them in the way that was best for that individual.

Is the service responsive?

Our findings

People received care that was flexible and responsive to their changing needs. People told us that staff knew them well and understood their needs. Staff were able to confidently describe people and were able to identify signs when people were not happy, which enabled them to speak to the person and try to address any feelings or concerns. People had access to a specialist therapist and one person told us this has a positive impact on their wellbeing. This demonstrated that staff had got to know people's individual needs very well and were able to support them appropriately.

People's care records contained personalised information about them, such as their health conditions, their preferences and life history. This information enabled staff to support people in the way they wished to be supported but also in a way that helped them to remain as independent as possible.

People were supported to engage in group and individual activities relevant to their individual needs and abilities. Each person had a weekly schedule of groups they could attend on a range of topics. They also had one to one sessions with their keyworker and times allocated for other tasks such as cleaning their room or doing their shopping.

People were provided with a range of opportunities to feedback their views on the service. People's views were sought through coproduction meetings and people were able to give their feedback through completion of questionnaires.

People's views were taken into account and things changed. Some of the feedback was about how the service operated and what people wanted to happen in their home. The registered manager was extremely supportive of promoting people's independence and this was evident through consultation and joint coproduction meetings held between staff and people who lived at the service.

People told us they would feel comfortable raising any complaints with the management team should they need to and that they were confident that appropriate actions would be taken. We saw that there was a process in place to investigate and report findings when a complaint was raised. A staff member told us, "We look positively when a concern is raised as it gives us an opportunity to improve." One person told us, "Since [registered manager] has been here things have improved, they definitely listen to what we say."

Is the service well-led?

Our findings

The registered manager and management team were open, transparent and there was an inclusive culture at the service. One person told us, "I think this is a good place to live, it is much better than where I lived before and it is well managed." People were able to tell us who the registered manager was. One person told us, "They are always around, yes they do have a visible presence."

People told us that they felt the service was well-led. One person told us, "The managers are always available if we have any concerns and always acts on anything we raise with them. They are very approachable." The provider promoted a positive, inclusive culture within the service. It was evident from conversations throughout the inspection that the registered manager put people first and everything that happened at the service did so with full consultation from people who used the service.

We saw that the home was well maintained with a programme of tests and checks completed regularly. This included things like portable appliance testing (PAT), checks of fire extinguishers, and gas safety checks. Some of the maintenance checks were completed by a person who used the service with support from staff. The person showed us their records of daily, weekly and monthly checks which they had completed. For example, fire safety checks, weekly fire alarm testing and checking equipment such as fire extinguishers. Any issues identified were dealt with proactively which helped ensure risks were mitigated and managed effectively. This was incredibly positive for the person and they were really committed to making a positive contribution to the service and their home.

The provider had a regular programme of quality assurance processes in place to continually make improvements and to assess the quality of the service. Areas audited included areas as health and safety, medicines, care plans and records. Where shortfalls were identified records demonstrated that these were acted upon promptly.

The provider sought the feedback of people who used the service, their relatives, staff members and external health professionals. People, staff and professionals all felt the management listened and valued people's views and input.

This information was used to drive forward improvements in the service. Staff were clear about their roles and responsibilities and told us they felt valued and motivated. One staff member told us, "We work well as a team, when we have challenges, we discuss them and agree a way forward."