

Leonard Cheshire Disability

The Regent

Inspection report

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Date of inspection visit: 16th March 2015
Date of publication: 08/05/2015

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 

Overall summary

This announced inspection took place on the 16th March 2015. The provider was given 48 hours' notice of the inspection visit because the location provides personal care and support to people in their own homes. As the people who use this service often accessed community activities we needed to make sure people were available to speak to us. The Regent provides personal care to people who have a learning disability or other complex needs.

During our previous inspection visit on the 13th December 2013 we found the service met all the national

standards we looked at. Since then there have been no incidents or concerns raised that needed investigation. At the time of our inspection The Regent provided personal care and support to seven people.

There was a registered manager in post on the day of our visit. 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.

The inspection team consisted of one adult social care inspector.

Summary of findings

We found that people who used this service were safe. The support workers had completed training in the protection of vulnerable people and were aware of their responsibility to keep people safe and free from harm. Staff knew how to report incidents that gave them cause for concern and were confident the management team would listen to them.

There were good systems to ensure people knew the staff that supported them. Staff rosters ensured there was consistency within the staff team and the people we spoke to knew the support workers well.

The provider had robust recruitment policies and procedures in place which ensured only suitable people were employed to care for vulnerable people with complex needs. Records evidenced that all the appropriate checks were completed before people started work at the regency.

We found that the service worked well with external agencies such as social services, other care providers and mental health professionals to provide appropriate care to meet people's physical and emotional needs.

We saw that medicines were administered safely and all the records were up to date and checked regularly. All staff had completed training in the safe handling of medicines.

We saw people were encouraged to take part in a variety of activities in the community including work placements, holidays and outings.

The service followed the requirements of the Mental Capacity Act 2005 Code of Practice. This helped to protect the rights of people who were not able to make important decisions themselves.

We saw that professional advice from adult care social workers, the learning disability nurse and other health care advisors was accessed as and when necessary. Health care needs were met through people's own GP practice.

Personalised care plans were in place in a format that was suitable through pictures and symbols as well as writing.

There was an appropriate internal quality monitoring procedure in place. Checks or audits were completed in respect of personal finances, medicines management, care plans, health and safety and equality and diversity. These checks ensured people were cared for and supported in the way they wanted to be.

Leonard Cheshire, the registered provider, also had formal methods for monitoring and assessing the quality of the services it provided. Annual survey questionnaires were sent to people who used the service asking for their feedback on the care and support they received. The results of the surveys were used to make any changes that may be needed to improve the service provision.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service is safe.

There were processes in place to help make sure people were protected from the risk of abuse. All staff had completed appropriate training.

Assessments were undertaken of risks to people who used the service and staff. Written plans were in place to manage these risks.

Recruitment procedures were robust and there were appropriate staffing levels to meet the needs of people who used the service.

Good



Is the service effective?

The service is effective.

Regular and appropriate training ensured staff had the skills and knowledge to meet people's needs. They were aware of the requirements of the Mental Capacity Act 2005.

People were supported to eat and drink according to their plan of care.

Staff supported people to attend healthcare appointments and liaised with other healthcare professionals if they had concerns about a person's health.

Good



Is the service caring?

The service is caring.

People who used this service told us they knew the staff well and liked them all.

Staff were respectful of people's privacy and treated them with dignity at all times.

People were involved in making decisions about their care and the support they received.

Good



Is the service responsive?

The service is responsive.

Care plans were in place outlining people's care and support needs. Staff understood people's interests and preferences.

Staff supported people to access the community and enjoy activities, voluntary employment and hobbies.

People told us the registered manager and staff were approachable and could discuss their care with them at any time.

Good



Is the service well-led?

The service is well-led.

People who used the service knew the registered manager well and were confident to raise any concerns with them.

Good



Summary of findings

Staff were supported by their manager and staff felt comfortable discussing any concerns with her.

The registered provider had systems in place to monitor the quality of the service provided. People who used the service were asked for their views of the service and their comments were acted on.

The Regent

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.

The inspection team consisted of one adult social care inspector.

Prior to the inspection visit we gathered information from a number of sources including the local authority and the health care providers. We looked at the information received about the service from notifications sent to the

CQC by the registered manager. A provider information form (PIR) was not received in relation to this service as one had not been sent for completion. A provider information return is a form completed by the registered manager outlining details about the service and the care and support provided.

The inspector visited the agency office on the 23rd March to look at records around how people were cared for and supported. We looked at the care plans belonging to four of the people currently supported by The Regent, four staff recruitment and training files and information about the policies and procedures.

We spoke to five support staff, the administration manager, four people who were supported by the service and spent time with the registered manager.

Is the service safe?

Our findings

The four people we spoke to during our inspection told us they felt safe when being supported by the staff from this agency. They said “The staff are very nice and take me shopping” and “I always feel safe when the staff are with me although I sometimes like to go to the shops by myself”.

We looked at the care records for four of the people supported by The Regent and saw they contained a full risk assessment of their needs in their home and outside in the community. Positive risk taking was in place in order for people to remain as independent as possible. All the people supported by The Regent take part in activities out in the community. Risk assessments were in place to keep people as safe as possible. People who went out by themselves were encouraged to keep the support staff informed as to their whereabouts and one person told us they rang the office if they were going to stay out for lunch.

We were able to speak to five of the support workers during our inspection visit and they confirmed they had completed training in the protection of vulnerable adults. They showed a good understanding of the different forms of abuse and were aware of their responsibility to keep people safe at all times. Staff told us they were mindful of what to look for when people return home after being out in the community although they had never noticed anything that had given them cause for concern. The staff

were familiar with the reporting procedure and were confident any concern they raised would be dealt with by the registered manager following the policy and procedure in place.

The Regent supported people with a learning disability and other complex needs in their own flats belonging to Impact Housing under tenancy agreements. Because of their needs people could display behaviour that could challenge the service or other people who used the service. Recognised training in techniques to support people with specific needs and behaviour had been completed by all the support staff.

We looked at four staff files during our inspection and saw the provider had an appropriate and robust recruitment and selection process. We saw that all the checks and information required by law had been obtained before new staff were offered employment in the agency. All new staff completed a full induction programme during their three month probationary period. We looked at the staff rosters and saw there were sufficient staff to meet people’s assessed needs.

We saw the medicines records were up to date and completed correctly. Regular audits/checks were completed to ensure there were no recording errors. Staff confirmed that they had completed safe handling of medicines training and arrangements were in place for an update/refresher course to take place in May of this year.

Is the service effective?

Our findings

People we spoke to during our inspection were all very positive about the care and support they received. They told us, “The support I get is great. I have been helping to build a pergola today and am going to help with the wall tomorrow. I like all the staff and get on well with all of them”.

People were supported by staff who had the knowledge and skills required to meet their needs. Staff training was provided in-house by experts from Leonard Cheshire as well as external agencies. The registered provider ensured the support workers had up to date knowledge and skills related to their roles and responsibilities. The registered manager provided us with details of the induction programme, staff training plan and refresher days and we saw that the training available was appropriate to the level of support provided.

We saw that all mandatory training was up to date and covered areas such as manual handling, infection control, first aid, person centred planning, fire safety and health and safety. Other ‘needs specific’ training was available for staff and included dementia care, autism, administration of medicines and epilepsy. In addition to the mandatory training all staff were completing training linked to the Qualification and Credit Framework (QCF) in health and social care to further increase their skills and knowledge in how to support people with their care needs.

Staff were aware of and had received training in the Mental Capacity Act (MCA) 2005. A refresher day was being planned for later this year. We saw from the support plans that, wherever possible, people were involved in their care and

treatment. We saw staff asking people how they wanted their support to be delivered. People told us that staff always discussed their personal care with them and always asked them what they wanted to do during the day.

The registered manager told us that if they had any concerns regarding a person’s ability to make a decision they worked with the local authority to ensure appropriate capacity assessments were undertaken. At the time of our visit none of the people supported by The Regent lacked the capacity to make decisions for themselves about their lifestyle.

People were supported at mealtimes to access food and drink of their choice. Much of the food preparation at mealtimes was completed by people who used the service with support from the staff. Staff had received training in food safety and were aware of safe food handling practices. People did their own food shopping with the help of the staff, if this was needed, and so were able to choose what they wanted to prepare and eat.

We were told by people using this service that their healthcare needs and medical appointments were organised by the staff at the agency who also accompanied them to the external appointments. People’s care records included the contact details of their GP so staff could contact them if they had concerns about a person’s health.

We saw, on the support plans there were protocols in place to assist staff to deal with specific aspects of people’s care such as epileptic seizures, behaviour that may challenge the service and other complex needs. Staff told us this type of information enabled them to know exactly what to do in any ‘out of the ordinary’ situation.

Is the service caring?

Our findings

People told us they were happy with the staff support. They told us they were never rushed if they wanted to take their time getting up and getting ready for the day. Staff told us that every day was different and sometimes people's choices changed from day to day. Comments about the staff were all positive and included, "These staff are great and I like them all", "I get really good care and get on well with the staff" and "I look at my care plan and talk to staff about my care".

Staff we spoke to confirmed they knew the people they supported well because they always worked with the same group of people. This gave a consistency of service that ensured people became familiar with the staff that supported them. We saw people received care when they needed it and in a way that took account of their expressed wishes and preferences. People confirmed that their support was always provided in a caring and respectful way.

When we visited people in their flats we saw staff treated them with respect and ensured their dignity and privacy were upheld at all times. Some people had limited verbal communication and we saw staff speaking to them appropriately and at the pace they preferred. People were relaxed in the company of the staff and responded well during the time we spent with them.

Staff were respectful of people's privacy and maintained their dignity. Staff told us they gave people privacy whilst they undertook aspects of personal care, but ensured they were nearby to maintain the person's safety, for example if they were at risk of falls. This helped to maintain people's independence.

People, as far as they wanted to be, were involved in the care planning process and were included in the care plan reviews with their key worker. Their key worker was a member of the support team who had special responsibility to make sure the care, support and activities enjoyed were most appropriate in meeting the assessed needs. All the people we spoke to knew who their key worker was.

The registered manager told us that if they had any concerns regarding a person's ability to make a decision they worked with the local authority to ensure appropriate capacity assessments were undertaken. At the time of our visit none of the people supported by The Regent lacked the capacity to make decisions for themselves about their lifestyle.

People were supported to maintain relationships with friends and family members and we saw that people visited their families on a regular basis.

Is the service responsive?

Our findings

People told us, “The staff help me to do the things I like best. I am going to the theatre soon” and “I love to go shopping sometimes with the staff but I also go out on my own”.

Staff knew the people they supported very well and were aware of their preferences, interests and their health needs. This enabled them to provide a personalised service.

We saw that, prior to people receiving support from The Regent, assessments were completed to identify people’s support needs and care plans were developed outlining how these needs were to be met. The support plans we looked at during the inspection visit were a working tool that was reviewed and updated every three months or more often if there was a change in the assessed needs. The support plans were written in a variety of ways with pictures and words. The actual format was personal to each individual depending on the level of their needs. We saw that staff liaised with family members with regards to hospital or clinic appointments.

People were encouraged to maintain their independence and undertake their own personal care. Where appropriate staff prompted people to undertake certain tasks rather than doing it for them. Throughout our inspection we saw this service emphasised the need for people to retain as

much independence as possible. We saw that the service provided to individuals was focussed on supporting them to achieve positive outcomes depending on their needs and their abilities.

People were involved in various activities within the community and some had voluntary or paid jobs they enjoyed. These included work in a local charity shop and working outdoors in a garden at a nearby centre. One person told us they job they had was helping them to save up for a holiday abroad with a family member later in the year.

Throughout our inspection visit we saw staff spent time with the people they supported to make sure they received care that was centred on the individual needs. Some people liked to spend time in their flats watching television or listening to music. One person had a large collection of DVDs that they enjoyed watching.

The provider had a complaints procedure in place, a copy of which was in the support plans. This was in an appropriate format using pictures and symbols as well as words. We asked people if that had a complaint what they would do. They all said they would speak to any of the staff or the registered manager. One person told us they were having a personal problem they were currently discussing with the registered manager.

Is the service well-led?

Our findings

There was a registered manager in post on the day of our inspection visit who was also responsible for another service in Cumbria that was part of the Leonard Cheshire Organisation.

We spoke to four people who were supported by The Regent and they told us they saw the registered manager often and could talk to her when they wanted to. They said, "If I have a problem or have a question I can speak to the manager at any time". When we spoke to one person they told us they did have a personal problem they were hoping to sort out with the registered manager who was aware of the situation.

We spoke to five members of the support staff team and asked if they felt well supported by the registered manager and they said they really did. They told us, "The manager is very good and really committed to providing a good service. We all work together as a team because we all want to give the best support we can".

We found, throughout our visit, the culture in the service was open and relaxed. Staff told us they had regular staff meetings when opportunities were given to make suggestions or raise concerns. The staff we spoke to were confident they would be listened to. They also said, "We don't have to wait for staff meetings if there is anything we need to discuss with our manager. We can raise anything we want at any time".

The service had an appropriate internal quality audit system in place and regular audits and checks were

completed. These covered things like medicines records and administration and care plans. We spoke to the administration manager who confirmed peoples' personal finances were checked each time a transaction took place. There were records that evidenced this.

Leonard Cheshire, the registered provider had systems in place to audit the service and themed audits were completed by registered managers from other services within the organisation.

Staff told us they had regular supervision meetings with their line manager and one of the support workers told us their next supervision was scheduled for the afternoon of our visit. The supervision meetings gave staff the opportunity to review their understanding of their core tasks and responsibilities to ensure they were appropriately supporting people who used the service. This included review of policies and procedures when required. The face to face meetings also gave staff the opportunity to raise any concerns they had about the person they were supporting or service delivery. Opportunities were also given to staff to make any suggestions about the running of the service if they thought care could be provided in a different way that was more beneficial to the people supported by this agency.

The registered manager told us they were well supported by staff from the head office of the organisation. Regular visits were made by the head of operations when they were given time and the chance to discuss the running of the agency. They said, "I get very good support from my manager, they are always on the end of the phone if I need anything".