

Valorum Care Limited

Miltoun House

Inspection report

Albion Terrace
Guisborough
Cleveland
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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

Miltoun House is a supported living service which provides personal care across two locations in Guisborough. Staff were onsite at these two locations over a 24-hour period. People had access to their own bedrooms, shared kitchen and living room facilities. People who used the service lived with a mental health condition and / or a learning disability. At the time of our inspection there were 18 people using the service.

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

People told us they felt safe living at the service and were supported by staff who were always available to them. Staff worked quickly to implement risk management plans when people experienced deterioration in their health to minimise the overall impact of harm to people.

Staff had the right skills and experience to deliver person-centred care to people. Staff received appropriate support and training to do this. Professionals were complimentary about the way staff worked with people to maintain their well-being.

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 treated with kindness and compassion and this had led to them feeling valued. People were supported to make decisions about their own care. Their communication needs were clearly outlined in their care records. Staff respected people's diverse needs and supported them to live their lives in the way they wanted.

Staff knew people really well. This meant they were able to support people in line with their needs, wishes and preferences. People were encouraged to be independent and be involved with all aspects of their care. People were supported to maintain their social contact with relatives, friends and with organisations in the local community.

Quality assurance systems were effective in delivering a good service which supported people with mental health conditions to live fulfilled lives and led to good outcomes. The staff team worked well together to provide a good service; they were responsive to change and willing to take on board new ideas to support improvement.

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 10 October 2020 and this is the first inspection. The last rating for the service under the previous provider was good, published on 12 February 2020.

Why we inspected

This was a planned inspection of a new service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Miltoun 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 (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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

Two inspectors and an Expert by Experience carried out 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

This service provides care and support to people living in two 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave a short notice period of the inspection because we needed to speak to people. Inspection activity started on 17 May 2022 and ended on 7 June 2022. We visited the location's office/service on 17 May 2022.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from Redcar and Cleveland local authority and professionals who work with the service, such as the fire service and NHS infection prevention and control team. We used all this information to plan our inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with 13 people who used the service, five relatives and one friend to capture their views about the care provided. We spoke to a social worker who provided feedback about how staff supported one person with complex needs. We also spoke with seven staff including the regional operations manager, the registered manager, a team leader and four support workers.

We reviewed three people's care records and two people's medicine administration records. We reviewed three staff records in relation to recruitment, induction, supervision and appraisal. We also reviewed records relating to the running of the service, including the provider's policies.

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 of 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; Learning lessons when things go wrong

- The provider has systems in place to deal with safeguarding concerns. Staff had acted quickly to deal with safeguarding incidents. Accidents and incidents were regularly reviewed to monitor patterns and trends. An effective approach was in place to support a lessons learned culture.
- People told us they felt safe living at the service and had confidence in staff to maintain their safety. One person said, "It is a really nice place to live. The staff know how to look after me." Another person said, "I am happy here. The staff are lovely and kind. I feel totally safe."

Assessing risk, safety monitoring and management

- Good systems were in place to oversee risk. The risks people faced with their health conditions were clearly outlined in the care records. These supported staff to deliver the care which people needed. Staff were responsive to risk and championed people's rights to ensure their needs were met. People said they had freedom, choice and control about how to live their lives.
- The safety of the building had been maintained. People and staff carried out regular fire drills to ensure they felt confident to act should a fire occur.

Staffing and recruitment

- There were enough staff on duty at all times to safely support people. The registered manager ensured there was good skill mix in place to meet people's diverse needs. Safe recruitment procedures were in place.
- People said they were happy with the staff team. One person said, "The staff are doing their best for us. There are enough staff and they have had lots of training."

Using medicines safely

- People's medicines were safely managed. Staff had carried out training to make sure they were competent to administer medicines. People who needed extra monitoring because of their prescribed medicines were supported to attend those appointments.
- Medicines were regularly checked to make sure people received them when they needed to. Records to support safe administration were person-centred.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.

- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider's approach to visiting aligned with government guidance.

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

- Staff were following best practice guidance to support people. Care records had been regularly reviewed and feedback sought from people to ensure their care remained relevant.
- People's characteristics under the Equality Act were protected. Staff encouraged people to make their own choices about their care and how they wanted to live their lives. People were supported when they wanted to try new things.
- Staff had received training in equality and diversity. The culture of the service supported people to achieve their potential.

Staff support: induction, training, skills and experience

- Staff were supported to carry out their role through training, supervision and appraisal. People said staff had the right knowledge, skills and experience to support them effectively.

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

- People were supported with their dietary intake and were involved in menu planning, cooking and food preparation. People had the opportunity to eat together or to cook and eat on their own. One person said, "We all eat together. I can choose what I want." Some people liked to eat out in the community.
- Care records outlined people's dietary needs and any recommendations from health professionals. They also included people's likes, dislikes and preferences based on their religious and cultural needs.

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

- Staff championed people's rights to make sure their healthcare needs were met. They supported people to speak up in appointments and maintained good links with health professionals involved in their care. People told us they felt supported with their healthcare needs.

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 MCA 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff worked in-line with the Mental Capacity Act (2005). They had received training and had a good understanding of consent and how people's ability to consent could change when they experienced a deterioration in their mental health. They understood people's communication needs and ensured their feedback was 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

- People told us they received good care and were always treated with kindness and compassion. Staff knew people really well. This supported the delivery of person-centred care. People said they felt able to speak with staff and had confidence that staff would act on their behalf if needed.
- Staff acted quickly when people experienced a change in their health conditions. Having good knowledge of people meant staff were able to seek support from health professionals or implement risk management strategies to help people to remain well. One person said, "There are a lot of people looking after me. The staff would recognise if I wasn't well." Another person said, "They [staff] are very nice and understanding."

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

- People were encouraged to share their views on their care and about how the organisation was run. They were encouraged to remain at the centre of their care. Staff provided feedback to professionals, however they made sure people felt supported to speak up and be confident in their own decision making.
- Staff encouraged people's relatives and friends to be a part of their decision making and had good links to signpost people to advocacy services when needed.
- Staff had time to spend with people. People were given the time they needed to take in new information, to ask questions and to talk about the things they needed to.

Respecting and promoting people's privacy, dignity and independence

- Care was delivered in a respectful way and actively promoted people to be as independent as they could be. People's choices were respected and where needed people were supported with these. Staff gave people reassurance about how they lived their lives and the choices they made.
- People were encouraged to maintain contact with those important to them. People had visitors when they wanted to and met loved ones in the community.
- Staff maintained people's confidentiality. This had led to positive relationships between people and staff.

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 received flexible support from staff which was tailored to their needs. The type of support people received varied in-line with their health and well-being. Care records supported the delivery of care and outlined people's strengths, independence and quality of life.
- People's needs, wishes and preferences were clearly outlined. Staff respected these. People were actively encouraged to do all that they were able to.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Care records detailed people's individual communication needs and how people liked to receive information. This supported staff to provide the most appropriate care to people.

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 participated in activities reflective of their wishes; this included baking, swimming and painting. Some people carried out activities together, such as gardening. Birthdays were celebrated with people from the service getting together for a party or to attend events in the community. Most recently some people and staff had gone out for afternoon tea.
- People were supported to maintain their social contact. They had regular contact with people important to them, attended community-based activities and were well known in their local community.

Improving care quality in response to complaints or concerns

- A complaints procedure was in place. People said they would speak up informally if they needed to. They said staff had been supportive of them when they raised an issue.

End of life care and support

- The service did not deliver this type of care. However, systems were in place should people's needs change.

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

- The ethos of the service supported people to achieve good outcomes. People said they were well supported with their mental health conditions and the care they had received had empowered them to believe in themselves and have maximum control over their lives. One person told us, "It is a nice place to live, and nice people. Nothing could improve it."
- Staff worked well together as a team and were committed to the future of the service. Managers were visible and acted as role models to embed the values of the organisation. Staff were open and transparent and engaged in learning to drive improvement.

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

- Staff at all levels had the right skills, knowledge and experience to carry out their roles. Resources were in place to support staff development and improvement in the service.
- Risk was well managed, and learning took place to support development in the service. Quality assurance procedures were effective and demonstrated the quality of care which people received.

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

- Feedback was sought and used to drive improvement. People were involved in decisions about how the service was run. They were kept up to date when changes took place.
- The service worked well with professionals and community organisations. People had good links with their local community. The service had received positive feedback from neighbours about the dedication of people living at the service who had maintained gardens at the front of the service.