

Care Worldwide (Carlton) Limited

Amelia 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?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Amelia House is a care home registered to provide accommodation and personal care to adults and young people transitioning between services with physical disabilities and/or learning disabilities or autistic spectrum disorders. The service can support up to 10 people in one adapted building. At the start of inspection there were nine people living at Amelia House, with a tenth person joining the service during the inspection process. The provider had recently added the activity of personal care to their registration to enable them to support people to move into a community setting with the same staff core group. This support had not commenced at the time of this inspection.

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.

People's experience of using this service and what we found
Amelia House was exceptional at placing people at the heart of the service. There was a strong, visible person-centred culture. Staff were highly motivated to offer care and support that was exceptionally compassionate and kind. The registered manager alongside staff placed the upmost value on people having as many opportunities as possible to develop their confidence, gain new skills and become as independent as they could.

People were treated with the utmost respect dignity, empathy, and compassion. People and relative told us the care provided for individuals exceeded expectations and they were happy. The ethos of the service was to empower people to live a life of their choosing. Staff had gone to great lengths to ensure peoples preferences and voices were heard, to ensure the support provided achieved this.

People were supported to take positive risks towards independence, using a creative and comprehensive approach to risk taking. This encouraged people to get the most of their support and achieve their goal to be as independent as possible.

Staff were exceptionally caring. They all shared the same hopes and aspirations for people to continue to live the lifestyle of their choice. People's voices were of paramount importance in the service.

People's physical and emotional wellbeing had improved with the support from proactive and dedicated staff. There was clear and consistent working with other professionals.

Where people lacked capacity to consent to some aspects of their care arrangements, 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.

The outcomes for people using the service truly reflected the principles and values of Registering the Right Support in the promotion of choice, control, independence and inclusion. The management team constantly looked for ways to improve the service. They had engaged people with complex emotional and behavioural needs in decisions and feedback at every opportunity. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The aspirational leadership by the registered manager ensured their vision was embedded within all the staff team. Support was bespoke and truly person centred. There was a culture of continuous improvement with a clear focus on ensuring any changes enhanced the quality of the service people received.

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 inspected on 5 September 2019 and published 2 January 2020. The service was not rated at this time as there was no one living there.

Why we inspected

This was a planned inspection based on the history of this service and because it had not been rated when we last inspected. We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

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?

Outstanding ☆

The service was exceptionally 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

Amelia 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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an assistant inspector..

Service and service type

Amelia House 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 is also registered to provide personal care to people living in their own houses, and specialist housing.

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. 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 sought feedback from the local authority and professionals who work with the service. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, deputy manager, team leader, and support workers. We spent time observing care to help us understand the experience of people at the service.

We reviewed a range of records. This included two people's care records and medication records. We looked at one staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two professionals who regularly visit the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated was not rated. At this inspection this key question has been rated as Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People were supported to take positive risks towards independence, using a creative and comprehensive approach to risk taking. Risks were minimised by very detailed risk assessments, with clear directions for staff that focussed on the positive benefits of being allowed to take risks. This encouraged people to get the most out of their support and achieve their goal to be as independent as possible.
- Restraint and restrictive practices were used at the service but only ever as a last resort. The first approach staff took was to work with people to understand the triggers to their behaviour, involving them in the decisions and achieving exceedingly positive benefits. Where other services had failed these people, this service was succeeding. We were met with many examples to evidence the positive outcomes for people.
- Positive behaviour plans were detailed and contained a range of strategies to minimise the risk of harm to people. The registered manager sought professional advice and developed effective strategies to reduce the amount of restrictive practices used at the service and could demonstrate the increasingly positive outcomes for people.

Systems and processes to safeguard people from the risk of abuse

- Staff knew how to ensure people were safeguarded against abuse and the procedure to follow to report any incidents. Some people at the service had been exposed to harm in the past so risks around online safety were keenly promoted.
- People and their relatives told us the service was safe and we saw people smiling, bantering and interacting happily with staff. One relative said, "Seems so much happier here. I'm really happy and no worries about this placement."

Staffing and recruitment

- Staff were recruited safely, and all the appropriate checks were carried out to protect people from the employment of unsuitable staff. People living there were offered the opportunity to be involved with recruiting staff and had done so the week before the inspection.
- There were enough staff to meet people's needs. People were supported by staff with similar interests and with the required skills to care for them. Each person had a core group of staff which did not change. This ensured staff knew people very well and people were supported by a consistent team of people who they had learned to trust and who they got on with.

Using medicines safely

- Medicines were received, stored, administered and disposed of safely. Staff involved in handling medicines had received recent training around medicines and were assessed as competent to support people with their medicines.

- The service had an electronic medicine administration records (MARs) to record when people were supported to take their medicines. There had been some issues with this during the pandemic, so they had reverted to using paper-based MAR. Additional checks had started after the identification of some errors, which demonstrated the service was learning lessons to improve care.

Preventing and controlling infection

- The registered manager was accessing Covid-19 testing for people using the service and staff. They were promoting safety through the layout and hygiene practices of the premises to make sure infection outbreaks could be effectively prevented or managed.
- The risks around Covid-19 had been assessed both in terms of people using the service and staff. The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The registered manager was clearly committed to identifying improvement within service and accidents and incidents were recorded and analysed to identify patterns and trends.

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.

At the last inspection this key question was not rated. At this inspection this key question has been rated as 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; 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.

- Staff positively worked to reduce restrictions on people. Records could demonstrate a reduction in the use of behaviour modifying medication and the number of staff required to support a person whilst out in the community.
- Mental capacity assessments were decision specific. The Court of Protection, the local authority and relevant people were involved in decision making in order to safeguard people and all actions were done with the best interests of people in mind.

Staff support: induction, training, skills and experience

- Staff spoke highly of the quality of training they received and the skills they had been supported to develop in order to carry out their role to the best of their abilities. Comments included; "It is constant training. It never ends. I really enjoyed the MAPA (Management of Actual or Potential Aggression) training and the ligature training."
- People received effective care from staff who received the induction and training they required to meet individual needs.
- Staff completed training in a range of different areas to ensure they had the right skills, knowledge and experience to deliver effective care. The provider had a programme of ongoing training which staff were expected to refresh at set intervals either face to face or online.

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

- People were supported by their support workers to undertake their own shopping and meal preparation wherever possible. Risk assessments were in place to ensure this was safe.
- Healthy eating was encouraged and promoted. Staff had successfully supported and encouraged people to both lose and gain weight. They had identified where people were not drinking enough and had plans in place to monitor and encourage this.

Staff working with other agencies to provide consistent, effective, timely care

- There were many examples of excellent person-centred joint working. We received exceptionally good feedback from external professionals about the lengths the service went to ensure the transition between services was successful. There was demonstrable evidence the service was working with the local transition team for young adults living with autism, who were moving to adult services.
- Staff worked with external professionals to help increase staff skills and knowledge, which ensured people were supported to remain healthy and to access health services to meet their health care needs. Staff were proactive and dedicated to promoting people's physical and emotional wellbeing.

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

- Thought had gone into the refurbishment of the environment to make it as homely as possible. People had chosen how they wanted the communal areas to be decorated and furnished, and they had succeeded in making it look and feel like it was their home. There had been incidents where furniture had been damaged but instead of making the environment stark the registered manager had looked at managing people's behaviours.

Supporting people to live healthier lives, access healthcare services and support

- The service was proactive in identifying people's health needs and promoting healthy lifestyles. They worked with people to encourage them to attend an annual health check and seek specialised support where needed.
- Detailed plans to support oral health were in place. The service had achieved amazing results in terms of weight loss and exercise, with involvement of people and staff.

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.

At the last inspection this key question was not rated. At this inspection this key question has been rated outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service

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

- Staff were exceptionally caring. They all shared the same hopes and aspirations for people to continue to live the lifestyle of their choice. People's voices were of paramount importance in the service. One professional said, "They have a pro-active approach and advocate for the service users they support. I have been extremely impressed with the rapport and communication methods that staff display with service users. They genuinely appear to care and want to make a difference to individuals, including increasing their skills and independence."
- The service was committed to ensuring those with complex emotional, physical and communication needs were kept fully involved and engaged, demonstrating an excellent approach to equality. One person said, "There is always someone to talk to, they actually listen. The staff make you feel comfy. It's not like a care home, it's more like we live all together."
- People were valued and empowered in the service. We saw many photographs on display evidencing the progress which people had made and their success celebrated. The main staircase was full of photographs of people and their support staff showing the activities they had done, how these were celebrated as achievements and the level of engagement between staff and people. The entrance had a 'selfie wall' where staff and people supported had their photos on display. These examples showed how people were supported to live the life they wanted to and how they were supported to take part in everyday life. One person said, "There is nothing I would change here."

Ensuring people are well treated and supported; respecting equality and diversity

- People were treated equally and supported to be who they wanted to be and with information to enable them to explore their own gender and sexuality if they so wished. They were fully informed of all local events and groups and there was evidence to show these discussions were taking place.
- Equality, diversity and human rights were promoted in innovative ways and we were given many examples of the impact this approach had on people supported. People consistently told us staff were kind and compassionate and encouraged them to live the life they wanted to live. One person said, "They would support you with how ever you identify." Another person's key statement recorded, "to support me best, staff must treat me like an adult and understand that I do not like being treated different because I am a person supported."
- People told us they experienced support from staff they chose or were matched with in line with their interests, including the preferred gender of care staff. One person was a keen walker and with great animation, told us of the many long walks they had been on with staff. People chose their furnishings and décor and one person who had an interest in fashion had chosen a designer wallpaper for their bedroom,

which staff were facilitating.

- People were involved in all decisions about their support from meals, to going on holiday for the first time and how they spent their day.

Respecting and promoting people's privacy, dignity and independence

- Kindness, compassion and respect were reflected in people's daily lives. The registered manager led by examples and said the key to their success was, "Listening and staff having empathy and caring. If I am kind and compassionate to my workforce, they pass that on. It is mirrored around the home. You can see it how the home is kept and how clean it is. It is people having the best lives."
- Staff support to people had resulted in people achieving greater independence and new skills underpinned by growing confidence in their abilities. They were proud of and celebrated people's achievement.
- We saw people's independence was encouraged and actively promoted. Where appropriate, people had the goal to live independently and staff encouraged them to gain new skills. Care plans demonstrated these goals towards independence. People did their own laundry where appropriate and kept their bedrooms clean.
- The size and layout of the building meant people did not have en-suite bathrooms. We asked people if this impacted on their privacy, and people told us "No", and that everyone was respectful of each other when using the communal facilities.

Is the service responsive?

Our findings

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

At the last inspection this key question was not rated. At this inspection this key question has been rated as 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

- Everyone received exceptionally well-planned and co-ordinated person-centred support that was unique to and inclusive for them.
- The service placed great importance on giving people choice and control. Care records truly reflected how people wanted to live their lives and what success looked like to them. One person had written about their success and achievement on the Amelia House blog, and how this had empowered them.
- Community professionals had recorded compliments detailing how impressed they were with the service; the detailed knowledge of people's needs and how well people were supported.

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.

- There was a strong focus on treating people with equality to ensure their voices were heard. As part of the care planning process, there were clear and detailed descriptions on how people wanted to be communicated with, whether verbal or non-verbal and their desired cues.
- One person who was coming to live at the service used a particular method of communication. Another person was an expert in this method. They and this person's key worker were involved in a training programme to ensure everyone learnt how to communicate with this person. They understood the importance of communication and the impact the ability to communicate has on wellbeing.

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

- Staff were exceptionally committed to working with people and helping them maintain relationships that were important to them and to build new relationships. The pandemic had curtailed some of the goals people had but these were replaced with achievable goals.
- Staff were in tune with people's complex emotional needs which had often resulted from past life experiences. They provided sensitive emotional support to promote their self-esteem and an aspiration to set and achieve their goals. These achievements could vary from being able to have a bath to moving into their own place. All successes were celebrated.
- There was a small enclosed garden to the rear of the property with garden furniture and an activity cabin. People used this to engage in activities such as arts and crafts, using the pottery wheel, and clay making,

Improving care quality in response to complaints or concerns

- People told us they would feel comfortable raising issues and concerns with any of the staff or the registered manager and they knew how to complain. We saw how comfortable people were around staff and how often they came into the office to see the registered manager. There had only been two complaints since opening and we saw they had been dealt with appropriately.
- People supported had been provided with easy read ways to complain and to understand what feeling 'safe' means. The registered manager was confident people would raise concerns if they were unhappy with care. We observed the door to their office was open for both people using the service and staff who were all comfortable to speak to them.

End of life care and support

- No one at the service was at the end of their life. The registered manager was fully aware of the importance of planning for the end of life taking into account protected characteristics, culture and spiritual needs. However, due to the anxieties some people had around dying, was acutely aware the timing of these discussions was absolutely essential and the time was not yet right.

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.

At the last inspection this key question was not rated. At this inspection this key question has been rated as 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

- There was a strong, visible person-centred culture which put people at the heart of the service. The registered manager and support staff demonstrated their outstanding commitment to developing people's skills and confidence and provide them with the tools needed to live more independently. This was evidenced in the many examples where people's lives had significantly improved.
- We continuously saw how the managers led by example and responded with compassion, imagination and thoughtfulness to people's preferences for support. Outcomes were well planned for people, and there was a strong emphasis on working collaboratively with others to ensure people got the best possible support.
- The values of independence choice and inclusion was at the centre of everything the service did. They were reinforced with staff through observations and open and informed discussions with staff. Staff exemplified these values and spoke with passion about their work. They spoke positively about the service and what it was like to work there. It was clear they all loved their jobs and they repeatedly told us it was the best jobs they had ever had.

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

- Without exception, staff and people supported spoke highly of the registered manager who they said led by example. The home was extremely well-led by the registered manager who was committed to ensuring high standards would be sustained going forwards.
- Strong working relationships had been developed between the registered manager and staff to deliver excellent care. One member of staff said, [Name] is the best manager I have ever worked under. Their ethos. The best possible life for people and it is magical."
- There was a focus on learning from incidents and adverse events. For example, we saw where things had gone wrong the service had put in place measures to help improve safety. The registered manager was open and honest when things had not gone well, how they had learnt from these but also notified the relevant authorities in line with their legal responsibilities.
- Regular audits were completed to monitor the quality. The provider audits were regularly undertaken but required strengthening to be reflective of this type of service. The registered manager was working to support this improvement.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service had developed strong links with the local community and people using the service had supported people who were isolating during the pandemic. This varied from support with shopping to sharing the fruits of their baking sessions. This was a huge improvement from the past where there had been issues with the local community.
- People were encouraged to take part in all aspects of communal living from supporting with the monthly events, house meetings, movie night and group activities. These were all aimed at teaching people what it was like to live with other people with different characteristics.

Continuous learning and improving care

- The registered manager thought ahead for ways to improve the lives of people living there. They had identified why people's move into a community setting had failed in the past and one of the reasons had been down to staff and inconsistent approaches. To ensure successful community living, they had registered to provide personal care in people's own homes, enabling the same core staff working with people at Amelia House to support the person in a community setting.
- The registered manager was actively seeking to reduce all episodes of restraint. They had undertaken extensive research into the different restraining techniques to ensure they moved to using the best possible practice. They were a member of the restraint reduction network (RRN) which is an independent network which brings together committed organisations providing education, health and social care.
- The service was signed up to STOMP (Stopping the overmedication of disabled people) which is a national campaign. This aims to ensure that people are not overprescribed medication. This had been discussed in team meetings and all staff embraced this with demonstrable results.
- The service was transitioning over to electronic records to give staff more time with people. The registered manager said, "Families can have access to sections, with lawful consent to log in to review the bits they want to check." Relatives spoke positively about the communication and how they felt included in decisions about the care of their relation. They praised the communication, the approach of the staff, and the remarkable difference the service had made.

Working in partnership with others

- The provider recognised the importance of working with commissioners and recognised the difficulty supporting placements from outside the local authority area. They had made the decision to provide a service which supports people from the local authority area where possible. They could evidence they had systems in place to work with commissioners from outside their area in line with nationally recognised best practice.
- Professionals spoke exceptionally highly about the service. One said, "The service is extremely well run, the communication and commitment from the manager has been one of the best experiences I have had in working with any service."
- Another professional said, "I have found [registered manager's name] and his team responsive, professional, organised and with the correct focus on safety and risk management."