

Royal Mencap Society

Royal Mencap Society - 25 The Sandfield

Inspection report

25 The Sandfield
Northway
Tewkesbury
Gloucestershire
GL20 8RU

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22 January 2020

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Website: www.mencap.org.uk

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

About the service

Royal Mencap Society - 25 The Sandfield is a residential care home providing accommodation and personal care for up to four adults with a learning disability, an autistic spectrum disorder and/or physical disability. There were three people living at the home at the time of our 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 using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People were safe. Risks to people were assessed, monitored and well managed. A person told us, "I love it here".

Staffing levels met people's personalised care needs. Staff followed good practice guidelines to prevent the spread of infection and gave people their medicines safely and as prescribed. The home was clean and tidy.

People were supported to access health and social care professionals. Dietary needs were assessed, met and guidance provided in care plans. People received enough food to eat and drink. One relative told us, "The food they cook is lovely, fresh and looks yummy".

People received quality care that contributed to their wellbeing. Caring relationships were formed between staff and people. People were treated with dignity and respect.

Staff recognised people as individuals and worked to ensure people felt fulfilled and had access to a range of activities and social stimulation. Staff actively supported people to remain as independent as possible, and encouraged them to help with household chores and cooking.

People's care plans contained detailed, personalised information that the staff and the registered manager kept under constant review. The registered manager carried out regular checks on the quality and safety of the service and understood their regulatory responsibilities.

People, their relatives and one volunteer gave positive feedback about the service, its staff and the registered manager.

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

support this practice.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk
The last rating for this service was Good (published 24 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Royal Mencap Society - 25 The Sandfield on our website at www.cqc.org.uk.

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?

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.

Royal Mencap Society - 25 The Sandfield

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.

Service and service type

Royal Mencap Society – 25 The Sandfield 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 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 the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with three members of staff including the registered manager and one volunteer who was visiting the service to take one person on an activity on the day of our inspection.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with one relative and one health care professional who regularly visited 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 as Good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person said, "It's safe here, I have my cat. I can also talk to staff." Staff had completed safeguarding adults training. Everyone knew how to report any concerns of abuse.
- The registered manager understood their responsibilities to report incidents of safeguarding to the local authority and CQC.

Assessing risk, safety monitoring and management

- People's risks were well managed and documented. People had behaviour support plans and risk assessments in place for staff to use as guidance and identify how risks would be managed, reduced or mitigated. Behaviour support plans were rated as Red, Amber and Green and guidance given for staff on how to respond should people display distressed behaviours.
- Each person had a personal evacuation plan in the event of a fire. Fire drills were carried out regularly.

Staffing and recruitment

- There were enough staff on duty to support people safely and effectively. This was confirmed in conversations with staff and looking at staff rotas. One staff member said, "We are a great team, we know people so well. There are often three staff so people can have 1:1 time." We witnessed one person going on a 1:1 activity to the cinema on the day of our inspection.
- The provider's recruitment process was robust and ensured skilled and experienced staff were employed at the service. Pre-employment checks were completed on staff before they came to work at Royal Mencap Society – 25 The Sandfield.

Using medicines safely

- Peoples medicines were managed safely. Staff had been trained in the safe handling, administration and disposal of medicines. We checked the stock of each person's medication and all levels were correct. There was clear guidance for staff on how to support people to take their medicines. There were protocols in place for 'as and when required' medicines for each person, detailing what it was for and any side effects.

Preventing and controlling infection

- Effective cleaning practices were in place. The home was visibly clean and tidy throughout. Staff had received training in infection control practises.

Learning lessons when things go wrong

- The registered manager told us they monitored accidents, incidents and complaints and would respond appropriately to these. The provider was given a monthly action plan and analysis highlighting any areas of

concern by the registered manager and visited regularly. This meant the provider had a good oversight of the service.

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 rated as Good. At this inspection this key question has remained the same. 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 and one volunteer we spoke with clearly knew the support needs of the people they were supporting. We monitored a variety of staff interacting and supporting people throughout our inspection. All interactions were person centred, caring and met the person's assessed needs as detailed in their care plan. One person was going swimming with their volunteer which they did every week. The volunteer clearly asked if they wished to have lunch in the café afterwards together. The person smiled and said 'Yes please.'
- The registered manager completed a detailed assessment of people's needs before they came to reside at the home. This was to make sure people's needs could be fully met and the home had a detailed understanding of how they wanted their support to be provided.
- Any protected characteristics under the Equality Act 2010 were identified, such as religious and cultural needs and lifestyle preferences. There was a spare room ready for a new person to move in and this had been adapted for someone living with mobility needs. The registered manager said, "We will look at compatibility of everyone living here to ensure we get the right person".

Staff support: induction, training, skills and experience

- New staff were supported with an effective induction and to complete the Care Certificate. This is an identified set of standards that health and social support workers adhere to in their daily working life. It is the minimum standard that should be covered as part of induction training of new support workers.
- Staff had completed sufficient training to support people effectively. One staff member said, "There is lots of training, I'm fully up to date." The registered manager showed us an online system that showed her when staff training was due to expire so they could ensure staff were booked onto the relevant training courses. Staff we spoke to appeared knowledgeable about people, their health and support needs and how to document these.
- Staff told us they felt well supported by the registered manager and had regular 1:1 supervisions with their line manager and yearly appraisals to look at future goals, support needs, objectives and development plans. One staff member wished to learn more about dementia and extra training was arranged.

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

- People's dietary needs were met. We saw menu's which involved people choosing what they would like to eat in advance. Care records gave staff guidance on how people liked to be supported with their nutritional needs.
- Staff were aware of people's dietary needs and preferences. People were encouraged to help with food preparation and tidying up after meals. One person said, "Mmmm we eat nice food".

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

- Staff recognised changes in people's health and sought professional advice appropriately. Records showed staff contacted local GPs and health care professionals promptly and followed their advice.
- People's care records showed relevant health and social care professionals were involved with people's care such as; dentists, opticians and members of the community learning disability team (CLDT). We saw people's changing needs were monitored, and changes in health needs were responded to promptly.

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

- People told us that Royal Mencap Society – 25 The Sandfield was a homely place to live. One person told us, "I like my room, its nice and warm".
- The home was decorated to a high standard and felt homely and clean. People's bedrooms were decorated to their own taste. An on-going maintenance schedule was in place and some areas of the home had recently been refurbished. The home had a new kitchen and a full bathroom re-decoration since our last inspection.

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.

- Records in relation to DoLS were kept under constant review. This meant that any conditions imposed as part of the DoLS authorisation were met. The registered manager continued to make appropriate applications for DoLS when these were needed. Staff understood the individual ways people using the service gave or withheld consent when they were not always able to communicate verbally.
- When people could not easily express their needs, care plans contained information from people who knew the person well, for example, families, primary carers and professionals involved in the person's support. Staff gained consent before providing support to people.

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 rated as Good. At this inspection this key question has remained the same. 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

- Staff were respectful of people's diverse needs. People told us that they were treated with a non-judgmental approach and staff respected their wishes, views and choices. The staff we spoke with told us they were aware of the importance of offering people choice to enable and empower them to make their own decisions about their care. People received care from staff who were kind and who knew them well. One person said, "They are very nice to me and my cat."
- Staff told us people had a plan of weekly activities in place which provided them with some structure and a regular routine for each day; however, this was flexible if people chose not to participate in the planned activities.
- People and their relatives views were consistently sought or acted upon. The service had actively sought and recorded the views and experiences of people who lived in the home since our last inspection. People had a designated space or time to raise or deal with any issues or concerns in their 1:1 hours or two monthly update meetings.

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

- People and their families were able to contribute to their care planning.
- Each person had a two monthly review of their care plan and support needs. These included goals and outcomes and were reviewed every two months. One person was supported to visit a family member at her new home. Another person wished for their bedroom to be painted in a warm grey colour. They were supported to go and choose what they wished for.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us that they or their family member were treated with dignity and respect. They also told us that the staff upheld people's privacy when they provided care. For example, people told us how staff would ensure doors and curtains were closed when supporting people with personal care or prompting for bathing.
- People and relatives told us staff encouraged people to retain and promote levels of independence as far as they could. For example, relatives told us that staff supported people to carry out some of their own personal hygiene and maintain their mobility. The staff we spoke with told us how it was important to enable people to participate in their care and do as much as they could for themselves as it would allow them to maintain a level of independence.

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 rated as Good. At this inspection this key question has remained the same. 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

- Staff confirmed they were informed about people's care needs and support requirements and worked in partnership with people's families. One relative said, "We have really good relationships with the staff, they visit here and we visit there. They are brilliant".
- One person told us they had choices. On the day of our inspection they chose to go to the cinema on a 1:1 with staff. Their relative told us they were given choices every day and able to try lots of new things.

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.

- People's communication needs were assessed and recorded. For example, people's preferred language was recorded in their care plan. The registered manager told us people were given information about the service in a format that met their needs. We saw many documents in an easy read format, including meal and activity planners. Daily notes were available for each person and were detailed and informative.
- People and their relatives confirmed staff took their time to speak with them and gave them time to respond to their questions, queries or concerns. One person had suffered a recent family bereavement and told us staff 'listened to them'. One relative said, "Staff are wonderful. They take time to listen and know [The person] so well. It's a great home."

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 and their relatives told us they were fully involved in conversations relating to making decisions about their care and support. This was during the initial assessment of their needs and continued at frequent intervals or when needs changed. One relative we spoke to told us, "I am fully involved in their care, they try new activities and is always out shopping, going to the cinema and trying new things. The staff are fabulous and [The person] has such a good quality of life. We have no complaints whatsoever."

Improving care quality in response to complaints or concerns

- The provider valued people's feedback and used it as an opportunity to improve the service. People and their relatives were aware of how to raise a concern or complaint.
- We reviewed the complaints file and identified that complaints were investigated, and action taken in line with the provider's policy.

End of life care and support

- The service was not currently providing any end of life care to people at the time of the inspection. The registered manager explained that they would review people on an individual basis if they required end of life care and assess whether the service could meet their needs. They told us they would be reviewing staff training in end of life care and the service's policies to ensure that they had suitable systems in place if people needed end of life support.

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 rated as Good. At this inspection this key question has remained the same. 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

- Staff commented positively on the support they received from the registered manager. One staff member said, "She [the registered manager] is very easy to talk to, approachable and I know she would listen if there were any problems."
- Relatives and health professionals were positive about the support provided to people living in the home. One health professional said, "It's such a lovely little home, people seem so happy."

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

- The people and relatives we spoke to praised the impact of the registered manager on the service. Staff told us the registered manager had an open-door policy and was available to support staff at any time. The staff we spoke with told us morale was good amongst the staff and the strong leadership from the management was a contributing factor to this.
- The registered manager had a series of audits that they completed regularly. The results from these audits were utilised in the home to help identify if there were aspects of care and support that could be improved.

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

- The registered manager undertook regular spot checks to observe the care and support provided by staff. Observations of practice recorded aspects of service delivery such as staff interactions with people, person centred care and practical skills.
- The registered manager understood their responsibilities to notify CQC and other authorities of certain events

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

- Staff told us they felt involved in the running of the service. For example, one staff member told us, "I feel I am a valued member of the team. I have had some personal issues recently, but the registered manager has been so supportive and helpful."
- The registered manager and staff said that they had a good working relationship with healthcare professionals and other agencies who were involved in supporting people.

Continuous learning and improving care

- A monthly improvement plan was in place which identified any actions or improvements for the home. The registered manager told us they felt fully supported by the provider who visited regularly.
- The registered manager told us they were constantly reviewing people's care and health needs as people were getting older and needs were changing. We could see from records we looked at that regular reviews were in place.

Working in partnership with others

- The registered manager told us they worked in partnership with others such as; Community learning disability team (CLDT), GP's, dentists and chiropodists and people could access healthcare when required. One health professional told us, "I have no concerns about the home. They are pro-active and engaging."
- People could access local community events and clubs and staff told us they had positive working relationships with local groups and clubs.