

Mr J Wilson & Mr P White

Westbourne Care Homes

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?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Westbourne Care Homes is registered to provide accommodation and personal care for up to 11 adults with learning disabilities. The building used by the service is formed from two terraced houses, with the female and male residents choosing to live separately. At the time of our inspection eight people lived at the service (three men and five women), all of whom had been there for over nine years.

This service was last inspected in December 2015 and was rated as good. This unannounced inspection took place on 19 October 2017 and we found that the service remained rated as good.

The service was required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The current registered manager had been in place at the date of our last inspection.

Why the service is rated good

People were protected because risk assessments had been completed to ensure people were protected from unnecessary risks but were able to experience new activities.

People's personal care and support needs were met by support workers who were available at the times needed.

People felt secure and safe in the service and with their support workers. Support workers had knowledge of the systems in place to protect people, and supported people to understand how they could protect themselves from the risk of abuse.

The provider's processes for recruitment of support workers complied with legal requirements. The provider also ensured the support workers employed received an induction and training to meet the needs of people using the service.

People were supported to receive the medicines prescribed by their healthcare professionals by support workers who had clear guidance about how to assist them.

People were supported to have maximum choice and control of their lives and support workers assist them in the least restrictive way possible; the policies and systems in the service support this practice.

People chose and were assisted to prepare some of their own food and drink.

People's health needs were regularly assessed and where necessary people were supported to access local

health care professionals to ensure their health care needs were met.

People's privacy and dignity needs were respected by the provider and support workers.

People contributed to the contents of their support plans which were regularly reviewed by the provider.

People were encouraged to raise concerns or make complaints about the service they received and were supported by support workers to do so.

People knew the registered manager and understood their role at the service.

The provider had management systems in place to assess and monitor the quality of the service and was seeking ways to further improve performance and develop support workers and to increase opportunities for people.

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 remained safe.

Is the service effective?

Good ●

The service remains effective.

Is the service caring?

Good ●

The service remains caring.

Is the service responsive?

Good ●

The service remains responsive.

Is the service well-led?

Good ●

The service remains well-led.

Westbourne Care Homes

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 checked 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 unannounced inspection visit took place on 19 October 2017 and was conducted by an inspector and an expert by experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. For this inspection the expert-by-experience was familiar with learning disability services

In planning our inspection, we looked at the information we held about the service. This included a notification received from the provider about an incident where an injury was sustained. We also looked at the Provider Information Return (PIR) which is a document containing current information about the service and the provider's assessment about how it is meeting the regulations. The PIR outlined the improvements the provider planned to make.

We contacted the local authorities who purchased the personal care packages and support on behalf of people to ask them for information about the service. We received positive feedback about the service and were not informed of any concerns.

During our inspection we spoke with all the people who lived at the service. We also observed support worker interaction with people to help gather additional information to assist our inspection findings. We also spoke with the registered manager and five support workers.

We looked at the support plans for three people to see how their support was planned and delivered. We also looked at four Medication Administration Records (MAR) and the medicine management processes and audits for the service.

We looked at the provider's recruitment procedure for support workers, and the system for recording training and supervision of support workers.

We also looked at records relating to the management and audits of the service and reviewed the provider's policies and procedures.

In addition following the inspection visit the provider supplied further information in relation to the audits undertaken.

Is the service safe?

Our findings

People were happy living at the service and felt safe with the support workers who helped them. One person we spoke with told us, "Yes, I like [support worker], they make me feel safe". Another person said, "I feel safe here because everybody [support workers] is with me." People had built up relationships with support workers some of whom had been employed at the service for several years.

People were protected from the risk of abuse. The provider held regular 'safe and well' meetings with people to ensure people had an awareness of situations where abuse could occur. All the support workers we spoke had received training to understand the signs of abuse and potential abuse. A support worker confirmed their understanding of safeguarding, "Protecting people from any sort of abuse, verbal, physical, emotional, financial. People tend to talk, they will talk to member of staff, you will see a change in people straight away to know if something is wrong."

We saw the provider had established recruitment procedures to comply with current legal requirements and reduced the risks to people's safety which could be caused by the employment of unsuitable staff. All the support workers we spoke with told us these checks had been completed before commencing work at the service.

People were happy there were enough support workers to meet their needs at the times they wanted. The registered manager told us this had been achieved by introducing flexi hours which ensured additional support workers were available when people required more support for example to undertake an activity in the community.

People were able to make choices and were not restricted from trying new activities. We saw people's care and support needs were identified and associated risks had been assessed to avoid restricting people from undertaking different activities, or limiting choice. The registered manager told us, "We are making sure we are getting it right from people's point of view, not be scared to let people do what they want, We want to find ways to help people do things."

People were assisted to take their medicines on time and as prescribed. We saw that the Medication Administration Record (MAR) sheets showed people had received their medicines correctly, and did not contain any gaps in recording. Clear protocols were in place for people using 'as and when required' medicines [P.R.N.] and support workers had access to medication profiles which explained the reason for the medication and how it should be given.

Is the service effective?

Our findings

People we spoke felt support workers knew how to assist them. One person told us, "They [support workers] support me, I go out with my key worker, I like [my key worker]." People were assisted by support workers who had all received recent training equivalent to the Care Certificate to ensure all support workers knowledge remained up to date. The Care Certificate is the minimum training, supervision and assessment that employees new to health and adult social care should receive as part of induction before they start to deliver care independently. The registered manager told us time was set aside each week for support workers to undertake training. All the support workers told us additional training was encouraged by the provider. One support worker said, "I have definitely had enough training here, it is amazing, if there is some training you want [registered manager] will find it."

People were assisted by support workers whose performance and application of training was regularly checked through supervisions, appraisals and observations. The support workers we spoke with were happy with their supervision, one said, "I have supervisions a few times a year, I find them useful you can get things off your chest. Appraisals can help show what I am not good at, if I am failing at something I can get support from my colleagues."

People's capacity to make specific decisions was assessed by the provider. 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. We saw throughout the visit that people were making their own choices, and support workers asked for consent before assisting people.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We found the service continued to work within the principles of the MCA. The registered manager confirmed there was no-one at the service subject to a deprivation of liberty. All the support workers we spoke with confirmed they had undertaken training and understood their responsibilities regarding the Mental Capacity Act (MCA) 2005.

People were supported to maintain their health and well-being by support workers who were aware of the changing needs of people as they become older. One person confirmed, "I went to the opticians and got new glasses." Another person said, "I got a toothache so I went to the dentist last week." We saw the support plans confirmed people had received support to access health professionals at appropriate times and that 'Hospital Passports' were in place. Hospital passports provide hospital staff with important information about people with learning disabilities and their health when they are admitted to hospital. We also saw that the provider had made adaptations to the building and added grab rails to assist people whose mobility had deteriorated to move around the building and maintain their balance.

People remained able to make choices about what to eat or drink. People were provided with assistance to prepare some of their own meals and drinks at times of their choosing. One person said, "The food is nice,

we get a choice and I eat the same as the other people." The registered manager confirmed that all the people were weighed regularly to ensure issues with nutrition were identified at an early stage. Where appropriate action was taken, for example adding extra calories to food to maintain weight but ensuring the meal appeared the same as the other meals.

Is the service caring?

Our findings

All the people had lived at the service for several years with the shortest period being nine years. We saw throughout our visit that people appeared very comfortable and friendly with their support workers. One person said, "I wouldn't want to leave here". The registered manager told us, "People have lived together for so long, they are individuals but they live more like a family." Most of the support workers we spoke with had worked with the same people for several years and had built up strong relationships as a result. A support worker said, "Coming to work is like going from home to home, the residents were lovely, lovely colleagues, everyone gets on."

People were supported to maintain family contact and develop personal relationships. We observed a support worker assisting two people with an activity and heard discussions about people's family which demonstrated good knowledge of their history and background. The registered manager informed us that people at the service had been supported to form relationships but they did not have a policy specifically dealing with sexual relationships. People had however been spoken to individually and in groups about sexual relationships and assisted to understand appropriate behaviour with other people.

Support workers understood the need to maintain people's privacy and dignity. There was an equality policy in place to help people at the service and support workers understand the need to respect people's differing needs. One person said, "Support workers are very nice ladies, I enjoy being with support workers, they're nice. They knock and give me privacy." We saw throughout our visit that people were asked for permission to enter their rooms, and to use the resident lounges by support workers.

People received information about the service in the method most suitable for them. The registered manager told us and we saw that notices and some of the support files were prepared in easy read format. We spoke to the registered manager about the accessible information standard. The accessible information standard aims to make sure that people who have a disability, impairment or sensory loss get information that they can access and understand, and any communication support that they need. The registered manager confirmed that further work was being undertaken to ensure all information relevant to people was presented in an easy to understand format.

People were supported to understand and deal with difficult situations. The registered manager told us about the death of a resident who had lived at the service for several years and formed good friendships with the other people at the service. The registered manager explained efforts and adjustments were made to keep the person at the service until it became necessary for them to move to a service capable of meeting their care needs. People had been supported to go to the person's funeral and were assisted in preparing a memorial service for the person.

Is the service responsive?

Our findings

People's support plans contained details about people's life history, their likes, dislikes and preferences, and how they wanted to be supported. People we spoke with were unable to talk to us about the specific contents of their support plans but knew they had access to them. One person told us, "Yes, my support plan is in my room." The registered manager told us all the support plans were in the process of being updated to ensure they fully captured the personal viewpoints of people. The registered manager said, "We want more of the viewpoint from the individual, it is nice to see how people see themselves and to hear what they want in their own words."

People's support plans were updated to meet changing needs. The registered manager told us people had regular reviews to ensure they were happy and if there had been any changes. The support plans we saw confirmed that people were having weekly one to one reviews. Staff meetings were also used to discuss changing needs. A support worker told us, "staff meetings are held every two months, we have discussed changing needs of residents as they get older. Staff also talk about how to cope with changes, like someone dying."

People were being assisted by support workers who had shared interests and were identified as being the most suitable to work with them. The registered manager said, "Support worker matching will be used to tie support workers to interests of people, for example for one person we are trying to match a support worker who likes football." This support worker matching was intended to provide a better experience for people because of the shared interest.

People were encouraged and supported to be independent and decide what they wanted to do as individuals and as a group. One person told us, "We have peer group on Sunday and talk, make plans for the week." Another person told us how they spent their week, "I go to day centre on Monday, Tuesday and Wednesday, on other days I go shopping, dancing, swimming, drawing,"

People told us if they weren't happy they would tell their support workers. The registered manager confirmed people were given the opportunity to discuss any grumbles at the weekly meetings. We saw this was a standard question on the form completed to record the weekly meetings. The provider had a process in place to manage complaints however no complaints were being investigated at the time of our visit.

Is the service well-led?

Our findings

Most people were unable to talk to us in detail about the management structure of the service. We saw however that people knew who the registered manager was and readily engaged in conversation with them. 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. One person told us, "They [registered manager] does a good job, I do think that, [registered manager] looks after me and everybody else."

The provider had a system to audit, monitor and improve the quality of care and support people, including procedures to record and analyse incidents involving people. The registered manager was aware of the danger of complacency from having a settled group of residents and support workers and was seeking ways to improve the service. Procedures and policies were made available to people and support workers, and we saw they were being regularly reviewed to keep up to date.

Support workers told us they felt supported by the registered manager, but acknowledged they had not had significant contact with the provider. A support worker said, "[Deputy manager] and [registered manager] are really good, any problems they will sort out or help you to sort it out, including personal problem. You can always ask them things." The registered manager confirmed there was a regular contact and monthly meetings with the provider to ensure the service was operating effectively, and to agree the future direction for the service.

People receiving services were invited to complete a satisfaction survey each year. We saw the response to the surveys were generally positive but were limited in detail. The registered manager told us that work was being undertaken to improve the wording and process to ensure more information was obtained from the next satisfaction survey to fully capture people's opinions in more detail.

The service maintained a good working relationship with service commissioners. A social worker told us, "The registered manager and staff team are excellent and have a good understanding of the care needs for the person I have placed there. I am always kept informed if and when the need arises. They are always friendly and accommodating." Another social worker said, "I have worked alongside the staff for many years who provide good quality care to our client. They always ensure the client's needs, wants and wishes are met."

There was a low level of statutory notifications received from the service. We were however satisfied that the registered manager understood their legal responsibility for sending us statutory notifications about events and incidents affecting their service or the people who use it.