

## Walsingham Support

# Walsingham Support - 3 Beacon Way

### Inspection report

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Date of inspection visit:  
28 June 2017

Date of publication:  
27 July 2017

### 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

We carried out an unannounced inspection at Walsingham – 3 Beacon Way on 28 June 2017. The service provides accommodation and personal care for up to six people with a learning disability. On the day of our inspection, there were six people using the service.

At the last inspection on 03 June 2015 we rated the service Good. At this inspection we found that the service remained Good.

The home had a registered manager in post. 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.

People told us they were safe and their needs were met by staff. Staff were knowledgeable of how to support people in a personalised way. People received care and support which helped them become more independent and confident in their abilities.

People were involved in planning the care and support they needed. They also met regularly with their key workers and reviewed their support plans to ensure it was fully reflective of their choices and preferences.

Care plans were detailed about people's needs and abilities and described how people should be supported to reach their goals. Risks to people's well-being were identified and regularly discussed and reviewed with people to help ensure they were protected from the risk of harm.

The service had appropriate numbers of staff to meet people's needs. Some agency staff were working at the home, however they were regularly used by the service and were familiar with people's needs. All the staff we spoke with were aware of people's needs, and knew how to support people safely.

The provider had a robust recruitment process in place which helped to ensure that staff were qualified and suitable to work in the home. Staff told us they had training and regular supervisions which helped them feel supported by the registered manager.

Staff we spoke with were passionate about helping people achieve their full potential and gain more independence and confidence to live their lives to the full. Staff cared for people in a friendly and caring manner and communication was effective between staff and people. People were supported to eat and drink well and to access healthcare services when required.

People were encouraged to live an active life and were supported by staff to pursue their hobbies and interests.

Medicines were managed and administered safely by staff who were appropriately trained and had their competencies checked.

The provider had a system in place to ensure that complaints were recorded and responded to in a timely manner. People knew how they could make a complaint.

The registered manager and the provider conducted a range of audits to ensure an effective monitoring of the quality and safety of the services. People and staff had regular meetings where they had the opportunity to voice their opinions and have a say in how the service was run.

## 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 Good.

### Is the service effective?

Good ●

The service remained Good.

### Is the service caring?

Good ●

The service remained Good.

### Is the service responsive?

Good ●

The service remained Good.

### Is the service well-led?

Good ●

The service remained Good.

# Walsingham Support - 3 Beacon Way

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 28 June 2017 and it was unannounced. The inspection was carried out by one inspector.

Before the inspection we reviewed the information we held about the service. This included information we had received from the local authority and the provider since the last inspection, including notifications. A notification is information about important events which the provider is required to send us by law.

During our inspection we spoke with two people who used the service, the provider, two permanent care staff and one agency care staff. We reviewed the care and support records of two people who used the service and records relating to the management of the service. We also contacted two relatives following the inspection to ask for their feedback about the service.

# Is the service safe?

## Our findings

A person we spoke with told us, "I do feel safe. Staff are very good to me." A relative said, "I believe that [person] is safe at Beacon Way and the staff will always help when [person] needs it."

Staff we spoke with all knew and understood the importance of keeping people safe. They were knowledgeable about safeguarding procedures and how to report their concerns internally and externally to local safeguarding authorities.

People had risk assessments in place for each area where a potential risk to their well-being was identified. Risk assessments were comprehensive and included the measures in place to minimise the risks and keep people safe from harm. For example there were risk assessments for people who were identified at risks of choking.

The provider had systems in place to ensure that environmental risk assessments and health and safety checks were regularly carried out to help ensure that the home was suitable and safe for people to live in. These included regular fire drills where staff and people participated to ensure they were familiar with safety procedures during a fire evacuation.

The provider told us that staffing levels were assessed based on the needs of the people. On the day of the inspection we saw staff were able to support people to go out although they had not planned this activity. This suggested that there were enough staff to accommodate people's wishes and needs when they needed it. There were regular agency staff working at the home who knew people's needs. Staff employed at the service were suitable and qualified for the roles they performed.

Employment processes were robust and helped to ensure that references were obtained from previous employers and that staff had a Disclosure and Barring Scheme (DBS) check prior to starting work. DBS helps employers make safer recruitment decisions and prevents unsuitable people from being employed

People's medicines were stored safely in lockable cupboards in their bedrooms. We reviewed the Medicine Administration Records (MAR) for two people and saw that medicines were given at the correct time and staff signed the records appropriately. Staff who administered medicines had received the appropriate training and had their competency assessed regularly.

## Is the service effective?

### Our findings

People told us staff knew how to offer them support. One person said, "They know what I need and they are good." On the day of the inspection we saw staff encouraging a person to take a shower and appropriately supporting a person who was anxious and restless in the morning.

Staff told us they had received training and regular updates on safeguarding training, manual handling, health and safety and other topics. Staff told us the majority of the updates were completed online, however they had face to face training in areas such as behaviour management. Staff told us they had regular supervisions where they could discuss their personal development as well as other issues. One staff member said, "We have regular training. Most of it is e-learning but we have supervisions where we can discuss any training needs. Recently we had face to face training about behaviour management." Another staff member said, "I do feel supported by the [Name of registered manager]. They are always approachable."

People told us and we heard staff asking for their consent for the support they provided. People consented to information sharing with other professionals that were involved in their care as well as consented to staff administering medicines to them.

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 Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). At the time of our inspection, applications for the Deprivation of Liberty Safeguards (DoLS) had been made. The registered manager had followed the correct procedures and was awaiting authorisations from the local authority supervisory board.

People told us they liked the food and they were involved in planning the menu weekly. People's food preferences were documented within their care support plans and these detailed if people had any special dietary requirements. For example we saw that a person wanted to lose weight. Staff supported them to eat healthy food and encouraged daily walks to help ensure the person achieved their goals. On the day of the inspection we saw people going out for lunch to local restaurants.

People were supported to access healthcare appointments when required and there was regular contact with health and social care professionals involved in their care if their health or support needs changed. People had an individual 'purple folder' to detail all their medical appointments and the outcomes of these. The 'purple folder' holds details of people's medical appointments, medical conditions and details of how to communicate with the person. We saw that people were also supported to attend annual check-ups such as dental appointments and opticians.

## Is the service caring?

### Our findings

People told us that staff were nice and caring. One person told us, "Staff are very kind." One relative said, "[Person `s name] has been there for over five years and I know that it is the best thing that's happened to them. [Person] has people around them who care and will support them. Staff are always friendly and [person] has a good relationship with the main carers." We observed staff interact with people in a positive and caring way. We saw that there were positive relationships formed between staff and people based on trust and respect. This was confirmed by people and staff. One staff member said, "I have a very strong relationship with people here. I have supported them for years. It is great to see the progress people have made in the years here."

People told us that staff respected their privacy and dignity and staff knocked on their doors before entering. We also saw that staff ensured the shower room door was closed when people had a shower and also staff prompted people to change their clothing if these were stained.

People told us they were encouraged to be independent and work towards their goals. One person told us they were encouraged to get involved in doing work around the home. Staff were aware of people's preferences and interests, as well as their health and support needs. They told us they knew each person `s personality and they provided care and support as people wanted.

Care plans evidenced people `s involvement and contained information about people `s abilities and goals. People had monthly meetings with their key worker and discussed every aspect of their care and support plans, what was going well and what they wanted to change. This gave people the opportunity to shape their care and support the way they wanted and needed.

People's support plans were written in an 'easy read' format to help them understand better what the information was. We saw that people, and where possible their relatives and/or other professionals were involved in the care planning process. Pictures and symbols were used to assist people to make choices about how they wanted to be cared for.



## Is the service responsive?

### Our findings

People told us that staff knew them well and they received the care they needed and wanted. One person said, "I do like it here. I can do what I like. I am going out for lunch today."

Care plans contained enough detail about people's history, preferences, interests and things they found important for staff to be able to support people in a personalised way. These were regularly reviewed with people. We saw that a person did not like to have a review meeting where they sat and discussed their care. Their key worker told us they held discussions with the person about their care whilst they were having a walk or if they were private enough in a pub or restaurant. They told us, and we saw in the care plan that they recorded the information they discussed with the person after and the person was happy with this arrangement.

People had a busy weekly activity schedule. Some people attended day centres four days a week. They pursued activities and hobbies such as swimming, shopping, going to shows in theatres, movies and many others. Staff told us about a person they had supported for years and the progress this person had made in becoming more active and socialising more. Staff told us the person had initially refused to go out however with the right support they had started going out to London shows, to have fish and chips, concerts and were living life to the full.

People knew how to complain and they told us they felt listened to. One person told us about a recent complaint they had made about a staff member who had not appreciated a joke the person made. However they told us they knew that what they considered a joke was not completely appropriate. The provider had a complaints procedure in place and they recorded and responded to complaints appropriately.

## Is the service well-led?

### Our findings

People, relatives and staff were positive about the leadership in the home. One relative told us, "If I have any concerns I always speak with [registered manager] and she will always do her best to do whatever she can to help." One staff member said, "The [registered] manager is approachable and supportive."

People and staff were given the opportunity in regular meetings to voice their opinions and contribute to the way the service was run. We saw from minutes that staff discussed peoples' wishes and made the necessary arrangements to accommodate these. For example some people had expressed their wish to go on holiday abroad. Staff had made arrangements for them to get their passport and accompanied them on holiday abroad.

The registered manager and the provider carried out a regular programme of audits to assess the quality of the service, and we saw that these were capable of identifying shortfalls which needed to be addressed. Where shortfalls were identified, records demonstrated that these were acted upon promptly. Regular surveys were sent out to people, relatives and professionals to seek their feedback about the quality and safety of the service.

The provider had plans in place to change the accommodation they provided for people. We found that they had planned this appropriately and held discussions with people and their social workers about the forthcoming changes.

Accidents and incidents were recorded and these were reviewed and analysed to enable patterns and trends to be identified so where possible plans could be put in place to keep people safe. For example we found that staff recorded changes in a person's behaviour and these were discussed with health professionals and analysed. Following this the health professionals involved changed the medicines the person was taking to good effect.