

Voyage 1 Limited

West Road

Inspection report

2 West Road
Hedge end
Southampton
Hampshire
SO30 4BD

Tel: 02380470557

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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

About the service

West Road is a residential care home providing personal care and support for up to four people with learning disabilities or autistic spectrum disorder. There were four people using the service 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 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

We received consistently positive feedback about the service from people's relatives, which was reflected in one relative's comments: "I am very pleased and impressed by the level of care provided at West Road, and the professionalism and caring nature of all the staff there. They work together as a team extremely well, creating an environment that is a true home for the residents."

There was a friendly atmosphere in the home and staff supported people in a kind and caring way that took account of their individual needs and preferences. People and their families were supported to express their views and be involved in making decisions about their care and support.

There were systems and processes in place to protect people from harm, including how medicines were managed. Staff were trained in how to recognise and respond to abuse and understood their responsibility to report any concerns. There were sufficient numbers of experienced staff to meet people's needs. Safe recruitment practices were followed to make sure only suitable staff were employed to care for people in the home.

Staff were supported to gain relevant knowledge and skills through an on-going programme of training, supervision and appraisal.

The service worked well with other agencies to promote people's wellbeing. People received regular and on-going health checks and support to attend appointments. They were supported to eat and drink enough to meet their needs and to make informed choices about what they ate.

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 service was responsive to people's needs and staff listened to what they said. Staff were prompt to raise issues about people's health and people were referred to health professionals when needed. People could be confident that any concerns or complaints they raised would be dealt with.

The provider and registered manager were promoting an open, empowering and inclusive culture within the service. There were a range of systems in place to assess and monitor the quality and safety of the service and to ensure people were receiving appropriate support.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

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

Rating at last inspection

The last rating for this service was Good (last report published 22 April 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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.

West Road

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

West Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 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. 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 took this into account when we inspected the service and made the judgements in this report.

During the inspection

During the inspection we met the people who lived at West Road and spoke with the registered manager,

operations manager and three members of the care and support staff. We reviewed samples of the care and support records of four people. We also looked at recruitment checks for a recently recruited member of staff and other records relating to the management of the service such as medicines administration records, audits, staff training and rotas.

After the inspection

We spoke with four relatives by telephone and received feedback via email from another relative. We received feedback from a community health and social care professional who was regularly involved with 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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff received training in safeguarding people, and demonstrated understanding of the policies and procedures for safeguarding and whistleblowing, which provided guidance on how to report concerns.
- The provider employed a behaviour therapy team to provide support for staff when required, including the development of support plans focused on individual behaviour and needs. Staff were knowledgeable about people's behavioural support plans and of appropriate actions to take such as reassurance and redirecting people to other activities.
- Notifications we received included details of appropriate actions taken by the service.

Assessing risk, safety monitoring and management

- A relative told us their family member was supported "to make his own choices, and these have been within appropriate boundaries to ensure his safety, and have remained consistent over the time he has been there." Another relative said, "He feels secure and happy there."
- People were supported to take planned risks to promote their independence. Records of risk assessment and management plans provided clear and relevant guidance for staff. The records had been regularly reviewed and updated and were written in such a way to prompt staff to manage each risk in the least restrictive way possible.
- A range of systems and processes were in place to identify and manage environmental risks, including maintenance checks of the home and equipment and regular health and safety audits.
- Records contained a fire risk assessment and regular checks and tests of the fire alarm, emergency lighting and fire safety equipment. Each person had a personal emergency evacuation plan. A current Legionella risk assessment was also on record.

Staffing and recruitment

- There was a consistent team of regular staff on duty. Staffing levels were based on people's assessed needs and kept under review. Since the last inspection there had been an increase in staff deployed to support people with activities.
- Staff were present when people spent time in the communal areas and people who were engaged in other activities were suitably supported. Staff rotas were planned in advance and reflected the target staffing ratio we observed during the inspection.
- The provider had continued to follow safe recruitment and selection processes to make sure staff were safe and suitable to work with people. We looked at the records of a member of staff recruited since the last inspection and saw all the required checks had been made before they commenced employment.

Using medicines safely

- People's medicines were stored appropriately and managed so that they received them safely. There were detailed individual support plans in relation to people's medicines, including any associated risks. Medicine administration records (MAR) were completed correctly and were checked regularly.
- Where people were prescribed 'as required' medicines, there were clear guidelines for when it should be given.
- Staff completed training and an assessment of their competence before they were able to administer medicines to people.

Preventing and controlling infection

- Staff received training in infection prevention and control (IPC) and were equipped with personal protective equipment. Cleaning schedules were in place and staff were clear about their responsibilities. All areas of the home we saw were clean and hygienic including food preparation areas in the kitchen.
- The provider carried out IPC checks and audits as part of the monitoring of the safety of the service.
- A health and social care professional told us that during a recent visit to the home, "I found the house and bedrooms in good, tidy and clean order."

Learning lessons when things go wrong

- Staff took appropriate action following accidents and incidents to ensure people's safety and this was appropriately recorded and reported. The provider and registered manager analysed this information for any trends. Following an incident when one person playfully pushed another person, which caused them to fall, support plans were reviewed and updated to try and ensure this did not happen again.

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

- Each person had a comprehensive assessment of their physical, mental health and social needs, which provided detailed guidance for staff about how to support them.
- Care plan assessments were reviewed regularly and updated when necessary. If there were any changes in people's health and well-being, staff sought appropriate support and advice from services such as Learning Disability Health Teams, GP and other health and social care professionals.

Staff support: induction, training, skills and experience

- Staff received a range of training that included safeguarding, equality and diversity, basic life support, moving and handling, and nutrition awareness. Records showed the service was up to date with essential training for staff. The provider was rolling out a new training course in active support and this was being implemented within the service.
- New staff had a suitable period of induction and shadowing experienced staff before they were assessed as competent to work on their own. This was confirmed by speaking with staff and seeing records. Staff were further supported through regular planned supervision and appraisal meetings, which were recorded.

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

- People were supported to eat and drink enough to meet their needs. Each person had a detailed eating and drinking support plan based on their requirements and preferences.
- Staff provided people with different food options, including the use of pictures, so that they were able to make an informed choice. We observed a planned activity taking place in the kitchen. Staff made pancakes, for which they had prepared a selection of fillings and toppings. People were encouraged and supported to choose and make up their pancakes. Everyone appeared to enjoy these.
- Relatives confirmed people were offered a choice of food and were supported to have a healthy balanced diet. One commented, "They eat well." We saw the fridge was well stocked with fresh fruit and vegetables.

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

- A health and social care professional told us, "During (recent) reviews I found that residents are supported to a high level by staff and I have no concerns with any aspects of their care and health. Any issues are dealt with promptly and completely and reported to our team."
- Staff were supporting a person with regular appointments in relation to a specific health issue and keeping the person's social work team informed. The registered manager had arranged for the person to continue attending at a hospital they were familiar with, rather than a more local one. The social work team

had emailed the registered manager to thank her and the staff for providing "great support."

- Each person had an oral health care plan and was supported to maintain oral health and at dental appointments. People had electric toothbrushes and care plans contained specific guidance for staff on how to support individuals.
- People's care plans also included guidance about their personal needs regarding hand and foot nail care, and opticians appointments.

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

- The environment was homely and fitted out appropriately for the care and support of people living there. Environmental adaptations were made according to people's assessed needs. A new stair banister had been fitted that was easier for one person to use. A shower seat had been installed after the registered manager had checked with an occupational therapist about its suitability to meet a person's needs.
- People were involved in choosing artwork and decoration for the home and their bedrooms were personalised in accordance with their own tastes and preferences. Staff had worked on improving the garden space involving two people who were interested in taking part in the project.
- There was a schedule of maintenance, renewal and decoration of the home that had recently included, for example, new patio doors. A complete kitchen refurbishment had been designed and planned for the near future.

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.

- The registered manager had applied for appropriate DoLS authorisation where required.
- Staff completed training and showed an understanding of The MCA and DoLS.
- Mental capacity assessments had been completed and best interest decisions made with the involvement of relevant others. Care plans provided staff with guidance about how to involve people as fully as possible in making decisions.
- The service had contact details for a local independent advocacy service. An advocate had been involved in making a decision about a suitable holiday for one person.

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

- The service ensured that people were always treated with kindness. The positive effects of a caring environment were clear from the feedback from relatives. Their comments included, "It's excellent. He's very happy there. Staff are very supportive. It's just like home." "He can't wait to get back (to the home) after a visit. Good little family, they get on well with each other." "They seem to get very well. It's a homely feeling. Staff stay there and we get to know them" and "We visit (the home) regularly and he always seems happy when we see him."
- A health and social care professional told us, "The relationship between staff and residents is very good. The staff clearly care about the welfare of the residents."

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

- Staff knew people's individual communication skills, abilities and preferences. People's care and support plans included guidance to assist staff to involve the person and help them with everyday decisions. For example, how best to present information and ways to help the person understand.
- Regular meetings took place between individuals and their key workers, to ensure that they were consulted and informed about their support and what happened in the home. Formal reviews were held with the involvement of the person's family, staff and external professionals.
- A relative told us, "(Person's name) has had consistent staff looking after him, with one key worker for the whole period. He does not manage well with change, so this stability has been a major factor in him settling in so well. The staff are all very caring, and provide excellent person-centred care. They got to know (person's name) quickly and discovered his preferences and likes and dislikes." Another relative said, "Staff know him very well."

Respecting and promoting people's privacy, dignity and independence

- Feedback from relatives confirmed people's independence was promoted as much as possible and their privacy and dignity was respected.
- Staff spoke about people in a respectful manner and demonstrated understanding of their individual needs. People's care and support plans were written in a respectful way that promoted their dignity and 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

- People received personalised care and support specific to their needs and preferences. Each person was seen as an individual. A relative commented, "I have never known him to be so happy and well-adjusted to his environment and others in his proximity. He is always keen to return to West Road after days out, and engages instantly and positively with the staff on duty."
- We observed staff interacting with people in the home and involving them in daily tasks. Another relative commented, "He talks about it as home, he calls it home."
- People's care and support plans were comprehensive, and staff completed daily records of the care and support people received. Any health concerns were addressed and referrals sought from appropriate professionals. Relatives told us they were involved in reviews of care and updated about any changes.

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.

- Each person had their communication needs assessed and documented as part of their care plan and was supported accordingly.
- A relative told us, "(Person's name) uses Makaton (a form of sign language), but this was not fully developed as the staff at his previous home did not know much, and this was not encouraged. Since coming to West Road, the staff have engaged with him in Makaton, and his vocabulary and ability to communicate have improved enormously. This has also led to a reduction in his frustration, as he is now able to make his desires and needs known, and have them met or explained. His behaviour has improved significantly as a result of this."
- The provider had a policy describing the processes that were in place for the provision of accessible information and communication support to meet individual needs.

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

- Each person had an individual programme of activities and outings. People could select from a range of activities provided through the organisation's day centres and also more individualised activities of their choice. A relative said, "(Person) likes to go out for lunch, for walks and shopping. They cater for that. And for holidays."
- A health and social care professional told us that while on a recent visit to review people's care, "The

residents were very excited about the planning of the annual overseas holiday. One resident couldn't go overseas for health reasons and the staff went to great lengths for him to have a separate time away, which he thoroughly enjoyed."

- People were encouraged to develop and maintain relationships with people that mattered to them, both within the service and the wider community. One person had a friendship with a person who lived in another care home and had been supported to attend external events together. Another person's relative told us, "I can visit at any time and they offer tea and coffee. I feel comfortable going there."

Improving care quality in response to complaints or concerns

- A complaints procedure was given to people when they first moved into the home and was also displayed around the home. This was made available in an easy read picture format for people who were unable to read complex information.
- No complaints had been received since the previous inspection. Relatives told us that they would be comfortable raising any complaints with the staff or registered manager and they were confident they would deal with the matter effectively.

End of life care and support

- Any advance decisions, end of life care and support plans were reviewed with the involvement of people's family members and other representatives.

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

- The registered manager was promoting an open and inclusive culture within the service. We received positive feedback from relatives and staff about how the home was managed. Relatives told us, "They're an excellent team. They've got the right mixture and the right philosophy." "Always done a very good job. They're a good team." "Really very happy with the service" and "Absolutely delighted with the service. It's all working extremely well and meets all his needs."
- The registered manager was well organised and supported by a motivated staff team. Staff were aware of and worked within the values and aims of the service, which included promoting people's rights, independence and quality of life.
- Staff received recognition for their work and achievements, for example, the operations manager had nominated the registered manager and staff for a residential care team of the year 2019 award.
- The provider empowered people to be involved in the running of services through individuals taking part in audits as Quality Checkers. The provider also held various events, such as a 'Growing Together' summer ball that gave people and the staff from other services an opportunity to get together.

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

- Staff team meetings were recorded and regular agenda items included policy updates, safeguarding people, health and safety, and discussion about ensuring good practice.
- Regular audits of the quality and safety of the service had continued to take place and were recorded. Audits were checked and monitored by the operations manager and quality assurance team and, where necessary, action plans were created and followed.
- Procedures were in place for responding to and reporting accidents and incidents. Where necessary, action plans were created and followed up until the actions were completed.
- The registered manager and provider understood their legal responsibilities and notified the commission appropriately. Where issues were brought to their attention, the registered manager and provider investigated these and informed relevant parties as needed.

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

- Relatives comments included, "The manager has asked for feedback, and comments and suggestions are

always acted on and explained. I have been involved in all decisions about (person's) care and informed about medical and other appointments and outcomes" and "(Registered manager's name) is very good, phones and tells me how things are."

- Satisfaction surveys were conducted that included questionnaires sent to people who used the service, relatives and external professionals. Responses were used to inform the service development plan. The views of people using the service were also sought via meetings with their key workers.
- Staff had opportunities to provide feedback about how the service was being delivered. Staff confirmed they were able to raise any issues or concerns with the registered manager and were confident that they would be addressed.

Continuous learning and improving care; Working in partnership with others

- Relatives told us, "I have never had to raise any issues." "I can't find fault. It's a happy group" and "Really very happy with the service."
- Staff told us how team meetings were also used to make learning engaging and fun. There were quizzes about subjects such as safeguarding, The Mental Capacity Act, and the Care Quality Commission. Buzzers with a variety of sounds had been provided for this.
- The provider had other locations and the registered managers had regular meetings in order to discuss how to improve the quality of services and keep up to date with developments within the care sector.
- The service worked in partnership with other agencies, including community health and learning disability teams, to support people's needs and promote good practice.
- The provider had carried out specific autism support assessments and worked in partnership with the National Autistic Society in developing services.