

Vista

Applegarth

Inspection report

1 Rutland Close, 117 Hinckley Road
Leicester Forest East
Leicester
Leicestershire
LE3 3PW

Tel: 01162395392

Website: www.vistablind.org.uk

Date of inspection visit:
07 February 2017

Date of publication:
06 April 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

Applegarth is a care home that provides support for up to six people who have a learning disability or autistic spectrum disorder and who have a sensory impairment. At the time of our inspection there were six people living in the home. At the last inspection, in September 2015, the service was rated Good. At this inspection we found that the service remained Good.

People continued to receive safe care. Staff were appropriately recruited and there were enough staff to provide care and support to people to meet their needs. People were consistently protected from the risk of harm and received their prescribed medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision and training that they required to work effectively in their roles. People were supported to maintain good health and nutrition.

People developed positive relationships with the staff who were caring and treated them with respect, kindness and dignity.

People had plans of care in place that were focused on them as individuals. This allowed staff to provide consistent support in line with people's personal preferences. People and their relatives felt they could raise a concern and the provider had implemented effective systems to manage any complaints that they may receive.

The service had a positive ethos and an open culture. The registered manager was a visible role model in the home. People, their relatives and staff told us that they felt confident that they could approach the manager and that they would listen. There were quality assurance systems in place to monitor and review the quality of the service that was provided.

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 remains good.

Is the service effective?

Good ●

The service remains effective.

Is the service caring?

Good ●

The service remains good.

Is the service responsive?

Good ●

The service remains responsive.

Is the service well-led?

Good ●

The service remains well-led.

Applegarth

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.

This was a comprehensive inspection that was completed by one inspector and an expert by experience on 7 February 2017 and was unannounced. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before the inspection, the provider completed a Provider Information Return [PIR]. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider returned the PIR and we took this into account when we made judgements in this report.

We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. This included the local authority who commissioned services from the provider. We also sought feedback from Healthwatch Leicestershire (the consumer champion for health and social care.)

During our inspection we spoke with three people who used the service. Due to communication difficulties it was not possible to seek verbal feedback from people. We observed interaction between staff and people who used the service throughout over visit. We spoke with three people's relatives to get their feedback. We also spoke with four members of staff including the deputy manager.

We looked at records and charts relating to two people and four staff recruitment records. We looked at other information related to the running of and the quality of the service. This included quality assurance audits, training information for care staff, staff duty rotas, meeting minutes and arrangements for managing complaints.

Is the service safe?

Our findings

People received care from a dedicated and caring team of staff. A relative told us, "[Person's name] is absolutely safe because there is always someone around." Another relative commented, "[Person's name] has been here a long time. I have never had a worry or a query." The recruitment process ensured that staff were suitable for their role and staffing levels were responsive to people's needs. We saw that staff were available when people needed them and that they did not have to wait to receive the support they needed. A relative said "People here are never alone. Our observations supported this view and we saw that staff responded to people's requests for care in a timely way.

Risks to people had been assessed and we saw that staff were vigilant and worked successfully to provide care and support in a way that kept people safe. The provider had a clear safeguarding procedure and staff were knowledgeable about the steps to take if they were concerned. One member of staff told us "It is important that I do not try and deal with it myself and tell the manger. I would follow the procedures that are in place." Safeguarding notifications had been raised when required and investigations had been completed in a timely manner.

People received their medicines safely. Medicines management systems in place were clear and consistently followed. We found that staff had not always dated creams when these had been opened. It is important to do this to make sure that creams are used within the timescales described by the manufacturer to make sure they are effective. Following our inspection the registered manager told us that they had replaced any cream that had not been dated when it had been opened and they had added a check onto the weekly medicines audit around this. We saw that people consistently received their medicines when they should.

Is the service effective?

Our findings

People received care from staff that were knowledgeable and had received the training and support they needed. A relative told us, "The staff know what they are doing and are well trained." Staff training was relevant to their role and equipped them with the skills they needed to care for the people living at the home. For example, staff had received specialist training in supporting people with sensory impairments and were supported to put what they had learnt into practice. All staff had regular supervision and appraisal; one staff member said that "I have a very good rapport with my supervisor. They are fantastic on a personal and professional level. I get excellent support at work." Staff had received a detailed induction. One staff member told us, "It was the best induction I have ever had to allow me to get to know people's needs." We saw that the induction process involved staff working on a number of shifts shadowing more experienced members of staff to get to understand how to work with each person.

People were encouraged to make decisions about their care and their day to day routines and preferences. A staff member told us, "We don't give too many options as it can be daunting. We offer two things the person likes. They can always decline and have something else." Staff had a good understanding of service users' rights regarding choice.

Detailed assessments had been conducted to determine people's ability to make specific decisions. Where appropriate Deprivation of Liberty Safeguards (DoLS) authorisations had been obtained from the local authority. We saw that people were offered choices about what they wanted to wear, activities they wanted to do and what they wanted to eat. For example, we saw that one person had a planned activity. Staff asked them if they wanted to do this. The person declined the activity and picked something else they wanted to do. Staff respected this choice. Staff could describe to us how people would refuse if they didn't want to do something. One staff member told us, "[Person's name] doesn't vocalise choice but tells us by their behaviour." Another staff member said, "[Person's name] will go and pick another activity if they don't want to do it."

People were supported to maintain a healthy balanced diet and those at risk of not eating and drinking enough received the support that they required to maintain their nutritional intake. People had regular access to healthcare professionals and staff were vigilant to changes in people's health. Any changes in people's health were recognised quickly by staff and prompt and appropriate referrals were made to healthcare professionals. A relative told us, "[Person's name] sees the GP quickly and when needed. When they had to stay in hospital staff stayed with them even overnight." Another relative commented, "[Person's name] sees the GP, the dentist, and has their eyes checked."

Is the service caring?

Our findings

People developed positive relationships with staff and were treated with compassion and respect. One person's relative told us "I am very happy and proud [Person's name] lives here. It is a wonderful place. The staff are wonderful." Another relative commented, "The staff are very caring. They treat [person's name] like a family member. [Person's name] has a good quality of life." One relative said, "The staff are absolutely caring and lovely. I couldn't wish for better. I can't say how thankful I am that [person's name] is so well cared for." A staff member told us, "I am proud of the level of care and respect that people receive. I am proud of how they are looked after."

People were relaxed in the company of staff and clearly felt comfortable in their presence. A relative told us, "The staff understand [person's name] and he understands them." We observed that staff knew people well and engaged people in meaningful activities. For example, We saw one person being supported to go shopping to buy food for the house. People's choices in relation to their daily routines and activities were listened to and respected by staff. Staff treated people as individuals, listened to them and respected their wishes. Staff were observed speaking to people in a kind manner and offering people choices in their daily lives, for example if they wanted any snacks and where they wanted to eat their meals.

People were given information in ways that were easier for them to understand. We saw that information was available around the service that had been presented using simple words and pictures. Staff explained to us that they used different communication methods for each person and that this was based on their preferences and understanding. One staff member said, "[Person's name] has a box with different objects in. We use this as a countdown for them to help them to understand what is happening." We saw that staff had developed different communication tools to help people to understand aspects of their life. For example, one person had a tool that staff used to help them to tell what time an activity would be happening. Staff told us that this had helped the person to understand time more effectively and this had helped to reduce anxiety around when things would be happening. We saw this tool used and the person seemed very comfortable and confident using it. Staff described that the person understood when it was time for their activity to start and would stand up. We saw that this happened.

People were treated with dignity and respect. We saw that people were asked discreetly if they would like to use the bathroom and as people were assisted in moving from their chair the staff explained how they would be moved and encouraged them to assist themselves. Staff were aware if people became anxious or unsettled and provided people with support in a dignified manner. Staff approached people calmly, used touch to let people know they were there and held people's hand to provide reassurance if required. We saw that staff supported people at their own pace and did not rush them.

Is the service responsive?

Our findings

People received care that met their individual needs. A range of assessments had been completed for each person and detailed care plans had been developed in conjunction with people living in the home and where appropriate their relatives. A relative told us, "I am always involved." Another relative said, "There is a care plan on the wall about what is happening for [person's name]."

Staff knew people very well; they understood the person's background and knew what care and support they needed. One staff member said "It is important that we get it right. Each person's needs are so different. We have to build trust with each person. The management are very hot on checking that we do things right for each person." Another staff member told us, "We have worked as a team to build staff's knowledge of each individual. New staff are given time to shadow [existing staff]. We support the same people every day and we know them. The small things can have a big impact so it is important that all staff are consistent. This helps people know what to expect." We spoke with a member of staff who had worked at the service for nearly four months. They were able to explain in detail each person, their needs and how they communicated. We saw that the support that was provided throughout the day and information in care plans was consistent with what the member of staff had described.

People were supported to follow their interests and take part in social activities. For example we saw staff had supported people to attend football and rugby matches for teams that they supported. A relative told us, "They take [person's name] out shopping and on holiday which [person's name] loves." Each person had an activity schedule that was based upon their interests and hobbies as well as tasks around the house. We saw that people were encouraged to develop their independence. For example, one person was supported to put their laundry in the washing machine and make their own drink. A staff member told us, "We encourage people to be as independent as possible." We saw that people were supported to carry out tasks to the best of their ability.

People were encouraged to build and maintain relationships with people who mattered to them. A relative told us, "They invited me for Christmas dinner which was lovely. They picked me up and brought me back home." Another relative said, "I am always made welcome when I visit." Another relative commented, "One of my siblings visits regularly." People had built a good relationship with other people who they lived with. We saw that people interacted well with each other throughout our inspection. A member of staff told us, "People will ask about each other if they are ever unwell. We are like a family."

People and their relatives were not always sure how to complain but felt confident that they could discuss things if they needed to. One relative said, "They communicate well with me and share information." Another said, "I wouldn't really know how to complain because I have never seen any incidents to warrant it." We saw that there was a clear policy in place and records were maintained of all issues raised with the manager and detailed the action they had taken regardless of whether this was via a formal complaint or not.

Is the service well-led?

Our findings

The service had a positive ethos and an open culture. Staff members were passionate about their roles and the people they were supporting. One staff member said, "It is so rewarding. It means the world when I take someone out and know that they got something out of it." Another staff member told us, "It is a very rewarding job. I see the changes in each person. I get excited about the small things. It is more like a second family for me." One staff member commented, "The main priority here is the individuals. Staff are very passionate about this. We all care. It is not about the job but the people." The provider had ensured that staff were aware of and prepared to use the whistleblowing procedure if they had any concerns about people's welfare.

People and their relatives were happy with the service that they received. A relative said, "It's a wonderful place. [Person's name] has a wonderful life and we are so very happy." Another relative told us, "They are all very professional. I couldn't wish for better." Staff members felt that they were part of the service and were able to contribute to its development. A staff member said, "We are always kept in the loop and told of any changes." There were a number of initiatives to allow staff to provide feedback, including regular staff meetings and visits from trustees and the chief executive where staff were able to meet with and have discussions with the directors and trustees. This gave staff a feeling of ownership and recognition for their hard work. A staff member said, "I am happy and feel valued. I want to progress to a management role. I don't want to leave the organisation."

People were positive about the registered manager and felt confident that they would always listen and take account of their views. Staff members felt that they were always friendly and approachable. One staff member said, "[Registered manager] is doing a fantastic job." Another staff member commented, "I don't think they could do anything better. They are all very supportive. We are a good team." Quality assurance systems were in place to help drive improvements. A relative told us, "I have filled in a questionnaire. It is a weight off my shoulders that [person's name] lives here." These included a number of internal checks and audits as well as a provider audit and visits to the service by trustees to check that people were happy. These helped to highlight areas where the service was performing well and the areas which required development. This helped the registered manager and provider ensure the service was as effective for people as possible.