

Voyage 1 Limited

46 Derby Road

Inspection report

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Date of inspection visit:
01 March 2016

Date of publication:
29 April 2016

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

This inspection was unannounced and took place on 1 March 2016. The service was registered to provide accommodation for three people. At the time of our inspection three people were using the service.

There was 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 felt safe and staff knew how to recognise and report any concerns. The staff had received training to maintain their knowledge and skills in line with their roles and responsibilities. There was a consistent staff team who knew people well. People had risk assessments in place to reflect their individual needs, maintaining their independence and safety. There were sufficient staff to support the needs of the people. People lived full and active lives. The registered manager ensured an on-going review of staffing took place reflect the changing needs of the people who used the service and support them in the activities they wanted to pursue. People received their medicines safely and there were checks to ensure appropriate recording and storage.

We found staff had an understanding of mental capacity and what that meant for people who used the service. The provider ensured that people had been involved in their care planning and where necessary best interest decisions had been made. People felt they received a good choice of food and their individual preferences were considered in the menu planning. Referrals to health care professionals were completed in a timely manner to ensure people's health care was maintained.

The staff had developed positive relationships with people and they knew about their life and daily choices. People who used the service told us they felt their privacy and dignity was respected, and they were able to do the things they wanted to do.

The registered manager had a range of auditing systems which reflected the continuous development of the care being provided. People told us they were happy to raise any concerns. Staff felt well supported by the registered manager in their roles, responsibilities and development.

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.

People told us they felt safe and secure. Risks assessments had been completed to support people's safety and maintain their independence. There were sufficient staff available who had been suitably recruited to meet people's needs. Medicines were managed and administered as required.

Is the service effective?

Good ●

The service was effective

Staff received an induction, training and on-going training to maintain their skills and knowledge. People were supported to make decisions and care and support was provided in the person's best interests. People told us they enjoyed the food and we saw they were fully involved with planning and preparation. Referrals and communication with health care professionals were timely to support health and wellbeing.

Is the service caring?

Good ●

The service was caring

Staff knew people well and we observed positive and caring relationships. People were supported to maintain relationships and were encouraged to promote new friendships. People were able to make choices and were treated with dignity and respect.

Is the service responsive?

Good ●

The service was responsive.

Meaningful engagements, hobbies and interests had been developed to maximise opportunities for people who used the service. Care plans were clear, informative, up to date and reviewed to reflect any changes to people's needs. Complaints were openly received and responded to as required.

Is the service well-led?

Good ●

The service was well led.

The provider had effective systems in place to monitor and improve the quality of the care people received. People and their relatives were encouraged to provide feedback. Staff told us they felt well supported by the registered manager and provider.

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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. Our inspection was unannounced. The team consisted of one inspector.

We checked the information we held about the service and the provider. This included notifications that the provider had sent to us about incidents at the service, and any information we had received from the public.

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.

We spoke with everyone who used the service and one relative on the telephone. We also spoke with two health care professionals, two members of care staff and the registered manager. We reviewed one care record to clarify aspects of people's care. We looked at the systems the provider had in place to ensure the quality of the service was continuously monitored and reviewed to drive improvement.

Is the service safe?

Our findings

People we spoke with told us that they felt safe. One person said, "I feel safe here because we all look after each other." A relative told us, "They support people in a safe environment, I know [person who used the service] is happy and the setup is perfect." We checked to ensure monies for people were stored and managed safely. We saw they were, and records we checked tallied with the money available. This meant people were offered safe facilities and the systems in place offered a clear audit trail.

People were protected from abuse by staff who understood how to recognise potential signs and knew how to report any concerns. One member of staff we spoke with said, "If you see something you say something." We saw there was guidance available on what to do if any type of abuse was suspected, and the staff we spoke with knew this information was available in the office. We saw the registered manager had contacted the relevant authorities to investigate any concerns that they had identified and they had also informed us as required. This demonstrated the staff were aware of their roles and responsibilities.

We saw that risk was assessed and managed to protect people. One person we spoke with said, "They talk to me about risk and we look at what is safe for me." Another person who used the service told us how the staff supported them with activities such as cooking. They said, "Risk assessments show me the right way of doing things. I know that I don't go into the kitchen if other people are in there as I could burn myself." We spoke with staff who were able to tell us what support people needed and this matched with what was written in their care records. This demonstrated that the correct information was available to guide staff to support people who used the service in a safe way.

People who used the service told us there were enough staff to meet their needs. One person we spoke with said, "I like all the staff and there are always enough staff to do things with. I'm going on holiday and the staff will support me then too." We observed that when people asked for assistance or needed support a member of staff was readily available to assist them. We saw people received one to one support with their activities and were encouraged to live full and active lives.

The staff we spoke with told us that they had been recruited following safe procedures to check that they were suitable to work with people. One member of staff said, "I had an in depth interview and started two months later after my DBS came through". A DBS is a disclosure and barring service check to see if potential staff have criminal convictions which could mean that they are inappropriate to work with people.

People told us that they were supported to take their medicines in a safe way. One person we spoke with said, "The GP talks to me about my medicine and the staff make sure I take it." Records that we reviewed confirmed that there were systems in place to monitor and manage the risks associated with medicines. For example, there were protocols in place to support staff with when people may need their medicine, and medicine administration records were completed and double checked as required.

Is the service effective?

Our findings

The Mental Capacity Act 2005 (MCA) provides the 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 capacity to take particular decisions, any made on their behalf must be in their best interests and 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. The application procedures for this in care homes and hospitals are called Deprivation of Liberty Safeguards (DoLS). We checked whether the provider was working within the principles of the MCA, and whether any conditions are authorisations to deprive a person of their liberty were being met.

We saw that the provider worked within the requirements of the Act. No one required a mental capacity assessment and there was evidence to confirm that people made choices on a day to day basis. For example, one person said, "There are no rules, I do as I please. I choose when I want to go on my appointments and who I want to see." There were no restrictions placed upon people, we saw the front door was unlocked and people had a key to their bedroom if they chose to do so. Another person said, "The staff are wonderful they have improved my confidence by allowing me to do things for myself." We saw that advanced decisions were in place for some people. This is a statement of a person's wishes and cannot be overturned by anyone. This meant that people were able to influence whether or not they wanted to refuse any specific treatment in the future.

No DoLS were in place but the manager was aware that applications for a DoLS were made to the local authority when necessary. Staff understood about people's capacity and the different levels of decision making. One staff member told us, "We support people to make their own decisions. We observed people were given choices and permission was obtained before support was provided. This meant staff were working to ensure people's best interests were protected.

New members of staff received induction training and shadowed existing members of staff before they started work as a full member of the team. One staff member told us, "I did shadowing for a week or two. It is very relaxed the staff team work well together and I get loads of support. We always consider each other's views." The registered manager confirmed newly recruited staff completed the national care certificate which sets out common induction standards for social care staff. The care certificate has been introduced nationally to help new care workers develop and demonstrate key skills, knowledge, values and behaviours which should enable them to provide people with safe, effective, compassionate and high quality care.

Staff told us there were regular meetings with their manager and the team, which provided opportunities to discuss their personal development and training requirements. One member of staff said, "We have monthly meetings and I have a mentor, the manager oversees this. We work together and discuss our vision and values such as respect and how you conduct yourself." Another staff member said, "We have to keep up to date with our training, we have face to face training and elearning. If you want training it is sorted quickly."

People liked the meals provided and choices were made available to them. People told us they took it in turns to prepare the evening meal. They told us they liked this because it meant they tried new things. We saw people were also encouraged to prepare their lunch with the support and guidance of staff where necessary. One person told us, "Its nice food, I can eat what I like and you can help yourself. The staff watch us when we are cooking to make sure it's safe and I'm really pleased because I have learnt new skills. I love that."

The provider had established positive links with health care professionals. One health care professional told us, "I have never felt any tensions or atmosphere there. There are good relationships and people are happy. The staff are polite courteous and obliging they have people's welfare at heart." Another healthcare professional said, "I can see there has been marked progress." Care records confirmed that people visited the optician and dentist for example, and one person we spoke with said, "I arrange my appointments with my keyworker, then they go in the diary." This demonstrated that people's healthcare needs were met in accordance with their personal requirements.

Is the service caring?

Our findings

People told us the staff treated them with kindness. One person said, "It's great, I like living here. All the staff are wonderful." Another person said, "I get angry and upset if I don't relax and the staff are kind because they help me relax." Another person told us, "I like [member of staff] they are a really good member of staff. I like the manager too she's a good manager because she helps me. All the staff are nice."

One person who used the service was having a friend over for a meal and they said, "I have invited them for tea, we met when I was out. We are very similar and they bought me a present. I am looking forward to seeing them later." Relatives we spoke well of the staff. One relative said, "If [person who used the service] is happy, I am happy. This placement has been great, the staff understand [person who used the service] well. To see such positive changes has been great because their lives are enhanced." They also said, "The staff understand [person who used the service] so well. They are very caring and the manager is fantastic. Everything works so well."

We saw positive interaction between people and the staff, and people were happy and relaxed in their surroundings. We heard staff speak with and respond to people in a calm, considerate and respectful manner. All the staff communicated with people effectively and used different ways of enhancing communication. For example staff used touch, ensured they were at eye level with those individuals who were seated and altered the tone of their voice appropriately. We heard the staff reassure people if they were anxious and responded with them in a calm and sensitive way.

People told us that staff were caring and respected their privacy and dignity. One person said, "I still need some support with the shower and cleaning my body and I am happy with the staff support, they are polite." Staff understood the principles of privacy and dignity for example, they checked to ensure people had heard and understood them and knocked on people's doors and waited before entering.

We saw that people wore clothing that was clean and appropriate for the time of year and they were dressed in a way that maintained their personal style. One person said, "I've bought all my clothes, I bought a dinner shirt and I dressed posh, I liked it, I would like to do it again. I need to keep them all clean and put them away properly."

A relative we spoke with confirmed the staff were caring they said, "The manager is fantastic, all the staff care are. To see the positive changes and how they have worked as a team has been great, people's lives are enhanced."

Is the service responsive?

Our findings

We saw that people were supported to be independent and involved in all areas of daily living and to be socially included. A staff member said, "I love this job it's so wonderful to see how excited they are about what they are doing." We saw that everyone was supported to undertake a range of activities, such as shopping, going to college, bike riding and visiting friends and family. People told us they enjoyed the things they did and one person said, "I'm never bored and it has increased my confidence." People who used the service were also responsible for managing their house and cleaned, cooked, did the laundry and other important tasks.

The provider was in the process of supporting people who used the service to be paid volunteers at their local head office. This was to support people to work on the reception, deliver post, manage payroll, arrange meeting rooms and the visiting attendees for example. This demonstrated people were continually supported to develop their skills and interests.

We saw the care records were personalised and showed people's needs were reviewed. The plans ensured staff had all the guidance and information they needed to enable them to provide individualised care and support. One person who used the service said, "I like talking about all the things in my care plan." With consent we sat in one review meeting for a while and saw the person who used the service was involved and aware of what was to be discussed and that their views and comments influenced future development. They said, "I played a football match and wanted to do it again so I have. My future goal is to do more bike riding so I can be fitter and healthier. I'm also going to try and listen more rather than just talk. When I listen, I learn."

People who used the service and those important to them told us they knew how to raise issues or make a complaint. They also told us they felt confident that any issues raised would be listened to and addressed. A healthcare professional told us, "I believe the manager follows through any actions that are needed." We saw the registered manager maintained a copy of complaints and any action that had resulted from the investigation. This meant any areas of concern could be reviewed to drive improvement.

Is the service well-led?

Our findings

The service was managed in an open manner where the opinions of the people and staff were sought and where possible put in place. People, their relatives and staff told us this created a positive culture and people and staff were able to freely give their opinions, enabling them to be part of how the service was run and managed. One person who used the service said, "The big bosses come and speak to us and check everything is okay. Everything is sorted for you there's no problem." A member of staff said, "I have been given support and all the skills needed to do the job which makes me feel really confident."

All the staff we spoke with said that people and their families were at the core of the service and they said the registered manager worked closely with everyone to ensure they were providing a service that was inclusive. One member of staff said, "Brilliant leadership." A relative said, "The manager is fantastic."

We saw questionnaires were offered to people and their comments included, 'Do what you do, it works.' And 'home from home'. We saw this feedback was collated and fed back to people who used the service via meetings to ensure that they knew they were listened to, lessons were learnt and changes were made where necessary. For example, the laundry had been decorated because it was considered shabby.

Staff told us they received supervision and appraisals., One member of staff said, "The senior does my supervision and there is always a senior on shift." Another staff member said, "We have meetings and share our ideas and opinions, we are all encouraged to share our views."

The registered manager understood their responsibilities in relation to their registration with us. The provider ensured notifications were submitted to us about any incident or event they were required by law to tell us about.

The registered manager carried out quality audits and reviews and had action plans in place when improvements were needed, these were monitored and reported on. Their audits ran in line with our questions, is the service safe, effective, caring, responsive and well led in areas such as health and safety and risk assessments. We saw where needed action was taken to ensure improvements were made. For example, if people who used the service went to new places a risk assessment was added to their plan of care to ensure their safety.

Other managers within the organisation would also audit the service to ensure consistency. The operations manager would visit and talk with people who used the service, look at records and offered feedback to the registered manager. This meant the provider continually strived to drive improvement and ensure people who used the service were receiving the necessary care and support.