

Precious Homes Support Limited

ABI Homes - Dyers Mews

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

This inspection took place on 27 June 2017 and was unannounced.

Abi Homes Dyers Mews provides accommodation and personal care to up to 5 people with learning disabilities and autism. The service was staffed at all times. At the time of our inspection the provider confirmed they were providing care to 4 people. At the last inspection, in March 2016, the service was rated Good. At this inspection we found that the service remained Good.

People continued to receive safe care. Staff were recruited appropriately and there were enough staff at the home to meet the needs of the people living at the service. 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 were well supported by the management team with supervision, training and on-going professional development that they required to work effectively in their roles. People told us they were able to choose what they wanted to eat, and received the support they required within this area.

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

People were well cared for and were treated with dignity and respect. We saw that care plans had been written in a personalised manner and enabled staff to provide consistent care and support in line with people's personal preferences. People knew how to raise a concern or make a complaint and the provider had implemented effective systems to manage any complaints that they may receive.

The service was well run and had an open culture. At the time of inspection, the registered manager was not available; however staff were being supported by a deputy manager and other visiting managers from within the organisation. Staff told us that they had confidence in the management team and their ability to provide quality managerial oversight and leadership to the home.

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. | |



ABI Homes - Dyers Mews

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 27 June 2017 and was unannounced.

The inspection was carried out by one inspector.

Before the inspection, we reviewed the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We also contacted the Local Authority for any information they held on the service.

We spoke with one person that used the service, and observed another person who was non-verbal and their interactions with staff. Other people using the service were not available to speak with during our inspection. We spoke with three support workers, the deputy manager, the operations director, and the manager who was temporarily supporting the service in the absence of the registered manager. The service had a registered manager who was not available on the day of our inspection. We reviewed four people's care records to ensure they were reflective of their needs, four staff files, and other documents relating to the management of the service.



Is the service safe?

Our findings

People received safe care from a dedicated team of staff who were confident in managing people's needs. One person told us, "Yes I'm safe here." The service was staffed at all times, and provided care to people within the home who were given one to one support at various times during the day. Staffing rotas showed us that appropriate support hours were being covered by the staff team. Gaps were filled by agency staff and managers also working shifts with people. Recruitment of new staff was being planned.

We saw that the service carried out safe and robust recruitment procedures to ensure that all staff were suitable to be working at the service. The staff we spoke with said there were enough staff on shift regularly, and agency staff that were used were regular and were able to get to know people. During our inspection we saw that staffing levels were consistent and people were responded to as required and in a timely manner.

People had risk assessments in place that were relevant to their needs, and were understood and followed by staff confidently. The service supported people who may at times present behaviour that can challenge, and risk assessments guided staff in the best way to support people in certain situations. All the staff we spoke with were aware and knowledgeable of safeguarding procedures, and had been provided with training in this area. One staff member said, "I feel confident to report anything that concerns me. I know it will be followed up by the manager." Safeguarding notifications had been raised when required and investigations had been completed in a timely manner.

We saw that medication was stored in a secure cabinet. All the medication documentation we looked at was accurate and audits were taking place. Stock levels were accurate, and we saw that information around the medication that people took was recorded within their files.



Is the service effective?

Our findings

People received care from staff that were knowledgeable and had received the training and support they needed. One staff member said, "I think the training is good. I have been able to do a level four National Vocational Qualification." We saw that staff had received specialist as well as mandatory training sessions, for example training within autism awareness. Training was tailored to the needs of the people which meant that staff felt confident and people were being supported fully with their needs. We saw certificates within files and also future dates for people to complete refresher training.

Staff were regularly supervised and had the opportunity to express themselves in one to one meetings with management. The staff we spoke with acknowledged that there had been some recent changes within the management team, but felt that they still had someone to go to at all times and were positive about the supervision they were receiving. Supervisions gave the staff the opportunity to discuss performance related issues and future development opportunities..

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. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

People were encouraged to make decisions about their care and their day to day routines and preferences. 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 and where appropriate DoLS authorisations had been obtained from the local authority. During our inspection, we observed that people were offered choice on a regular basis. Staff understood what DoLS were used for and how each person had a different level of ability to make choices within their lives .

People had choice in what food and drink they had. One person told us that staff took them shopping for the food they liked, planned out a weekly menu, and supported them to cook. They told us they were able to make the choices of what they wanted to eat every day. People had regular access to the health services and healthcare professionals that they required. We saw that health information was documented within people's files.



Is the service caring?

Our findings

People were treated with care and respect. One person said, "I like all the staff, I get on with them." During our inspection, we saw that staff all interacted in a caring and friendly way with people. People had the time they needed to communicate with staff. We saw that staff and managers all had a positive rapport with people, and people were comfortable around staff within the service.

Care plans we looked at contained information about people's personality and personal history. They explained the best way to support people according to their needs and preferences. The operations director explained to us that a new care planning system was soon to be implemented, which would further improve the content and detail of care plans. 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. We saw that staff promoted choice to each individual and enabled them to be as independent as possible.

The privacy and dignity of people within the service was respected by all the staff. One person told us that staff respected their privacy, and they could be alone in their own space if they wished. During our inspection, we saw that staff were respectful of people's privacy, they knocked on doors before entering, and informed other staff if someone was receiving personal care so they did not enter a room until that task was complete.



Is the service responsive?

Our findings

People received care that was specific to their individual needs and requirements. People were involved in their own care planning and met with staff regularly to review their care and make changes if necessary. Family members were also involved when people were not able to make decisions for themselves.

Staff knew the needs of the people they were supporting well. All staff and management that we spoke with understood the person's needs, background, and preferences, and were able to provide care in a personalised manner.

People were supported to follow their interests and take part in social activities. We saw that each person had hobbies and interests documented within their care plans. During our inspection, we saw that one person was supported to get ready to attend a day service, and another person was supported to attend their employment. One person said, "I like going bowling, and the staff take me." We saw that people's rooms were personalised and arranged in the way that they preferred.

There was a complaints procedure in place. One person said, "Yes the staff listen if I have a complaint." We saw that any complaints made were recorded and acted upon appropriately.



Is the service well-led?

Our findings

The service had a positive and open culture. The staff team had experienced recent changes within the management structure at the service. One staff member said, "We are getting used to a slightly different way of doing things, but we are positive that the service is improving and people are well cared for. At times in the past, some things may not have worked as well as they should have, but this is a positive and hardworking team." All the staff we spoke with made similar comments about the positive work environment and the good quality of care provided.

Staff felt listened to and able to speak to management whenever they required. One staff member said, "The deputy manager has been very good. We are also currently supported by a manager from another service within the company. They are both making positive improvements here." We saw that staff meetings were held and minutes recorded. Staff confirmed that they regularly attended staff meetings, and felt they were kept up to date with the service and could express any concerns that they might have.

Quality assurance systems were in place to help drive improvements. These included regular checks on care records and staff files to ensure the information was accurate and up to date. The service also had an external auditing company conduct a full audit on the service to highlight any areas for improvement and put action plans in place. Quality questionnaires were sent out to people to gather feedback on the quality of care they were receiving. We saw that if any concerns were raised, actions were recorded and carried out by management to ensure the service was as effective for people as possible.