

Avocet Trust

Neat Marsh House

Inspection report

Neat Marsh Road
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Date of inspection visit:
25 October 2019

Date of publication:
18 November 2019

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

Neat Marsh House is a residential care home providing personal care to four people with learning disability and/or autistic spectrum disorder. At the time of our inspection there were four people using the service. One adapted building has been designed to house four separate flats, each with lounge, bedroom, bathroom and kitchen. A communal lounge and laundry are also available to people that use the service.

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

People were protected from harm and risk, as safeguarding and risk management systems were followed. Staff recruitment, staffing numbers, management of medicines and infection control were based on robust practice and systems that also meant people were safe.

People's needs were effectively assessed including around health, nutrition and mobility and staff had the training and supervision needed to meet them. 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.

People were supported by caring, understanding and compassionate staff, who respected people's privacy, dignity, independence and diversity. This was achieved using person-centred support and positive behaviour support.

The service applied the principles and values of Registering the Right support and other best practice guidance. These principles 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.

Staff had the experience and skills to meet people's end of life needs, address complaints and communicate with people in their preferred way. The service was led by a registered manager who understood the responsibilities of their registration, quality monitoring and satisfaction systems. They fostered a positive and collaborative culture.

For more details, please see the full report which is on the Care Quality Commission website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (report published 14 June 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.

Neat Marsh House

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

One inspector carried out this inspection.

Service and service type

Neat Marsh House is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (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 CQC. 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 the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We looked at information we already held on the service. We contacted the local authority contracts monitoring and safeguarding teams for their views of the service. We used all of this information to plan our inspection.

During the inspection

We observed people spending time in their flats, spoke with the registered manager and three staff and reviewed a range of records. This included two people's care records, support plans and medication,

incident and accident documents. A variety of records relating to the management of the service were reviewed. We looked at three staff files in relation to recruitment and staff supervision, with a visit to the organisation's headquarters straight after the site visit.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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

- The provider protected people from harm. Staff were trained in safeguarding people from abuse and the systems in place meant safeguarding incidents were safely managed.
- One person told us, "Yes I am safe here" and staff said, "People get along well with each other. They look to us to keep them safe when in the community."

Assessing risk, safety monitoring and management

- People's risk were reduced. Staff completed and followed risk assessments to prevent or reduce any risks people might experience. They monitored people's safety and reported concerns to the registered manager. They amended risk assessments and practice as necessary.
- Staff were trained in physical interventions for people who may behave in a way that challenged the service. Staff used least restrictive measures such as diversion techniques to good effect. They said, "We only ever use diversion techniques and would only block and back off if a person tried to harm others."
- Accidents and incidents were monitored and analysed for trends to reduce any reoccurrence. People's environment was risk assessed and reviewed to ensure it was safe. Safety certificates were up-to-date and maintenance was well managed.

Staffing and recruitment

- People were supported by a sufficient number of suitable staff. Staffing rotas showed there were sufficient staff on duty. People experienced one-to-one support every day.
- Recruitment procedures and practices were robust.

Using medicines safely

- People received their medication safely. It was given as prescribed. Medicines were safely managed: requested, stored, administered, recorded and disposed of.
- People's support plans contained guidance on how they liked their medication administering. Records showed when people had taken medicines and who had supported them.

Preventing and controlling infection

- People were protected from infection risks by staff operating good infection prevention and control practices.
- Staff followed food hygiene guidelines and had received training in food hygiene. People supported with preparing food were encouraged to maintain good hygiene standards.

Learning lessons when things go wrong

- The provider encouraged staff to learn lessons from any events or incidents that resulted in poor outcomes for people, to make sure they did not reoccur. Staff told us, "We share information about incidents and use learning to avoid similar happening 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.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People received effective care. An assessment of their needs was carried out and documented.
- Support plans and positive behaviour support plans provided the information needed to guide staff on the best ways to support people. Staff followed good practice in the use of documentation.
- People's rights were respected and their diverse needs were supported so they were not discriminated against. Staff provided flexible support, so people received the nutrition they required and saw health care professionals, social workers or advocates. Staff told us, "We look and listen out for discrimination against people we support and would challenge it."

Staff support: induction, training, skills and experience; Supporting people to eat and drink enough to maintain a balanced diet

- People were supported by staff that had the experience and knowledge to effectively carry out their roles. Staff were trained, competence assessed and supervised.
- People were effectively supported with food planning and preparation and making healthy choices with their nutritional needs and specific diets.

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

- Staff worked well with other agencies to ensure people accessed the support they required including health care professionals, social workers and advocates. One person had support from the community nurse and staff with a particular behaviour, while another was now on reduced medicines following work done with their doctor.
- Staff supported people to maintain healthy lifestyles, but also respected people's choices and decisions.

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

- The provider met people's needs for independence and choice. People had individual flats within the service, so experienced the freedom and privacy they required. One person said, "I really like my flat. It gives me the chance to do what I want."
- Flats were decorated, furnished and equipped how people chose them to be and so as to cause them the least distress as possible. People's needs around their autism were understood and reflected in their environments. Staff told us, "[Name] knows what they like and will allow on the walls and you can't take their things from off the rug."

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 authorisation to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's rights were protected. The registered manager had submitted applications under the MCA and DoLS to the supervisory body for authorisation. Once in place these were monitored, reviewed and kept up-to-date.
- Staff were trained in MCA principles and always offered people the opportunity to be involved in decisions about their care. Staff knew what they needed to do to make decisions in people's best interests.

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

- Staff were caring and respectful. People trusted staff, as they sought staff company, were relaxed, interacted well with staff and continued to do what they liked or wanted to do.
- Staff had a caring, supportive approach and maintained professional boundaries. They provided guidance to people regarding relationships and friendships and particularly with one person to protect all parties.
- People's diverse needs around disability were understood and staff supported them to achieve their aims and goals. One person's sensory needs were managed well when out in the community.

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

- People were supported to express their views and needs. They made daily decisions about care support needs. Staff took the time to listen and helped people maintain routines to lessen anxiety. Staff directed people to sources of advice or advocacy if they needed it.
- Staff worked with people and relatives to determine how they preferred support to be given. Staff said, "We learned a lot about [Name] from working with their family." Information gleaned was recorded in people's care files and regularly reviewed.

Respecting and promoting people's privacy, dignity and independence

- The provider and staff respected people. Their privacy was maintained through each person having their own flat and staff providing guidance on the normal expectations of the communities they joined.
- People's diverse needs, around disability, gender, age, sexual orientation and beliefs were respected. Their privacy and dignity were protected during personal care, as staff sought their consent before supporting them. People's private and confidential information was discreetly managed.
- People were encouraged to be independent with visiting doctors and dentists and accessing their local community. One person said, "I like to go out."

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

- The provider met people's needs in a person-centred way. People and their families were involved in planning and reviewing care. Needs were satisfactorily recorded, monitored and reviewed when changes arose. Staff followed support plans to meet needs and told us, "We are always looking out for changes in people's behaviour and amend support plans to suit."
- Care and support plans were reflective of people's needs and told staff about preferences, routines and how best to support people.

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.

- The provider responded well to people's communication needs. These were appropriately assessed and met. Strategies were used to enable people to receive information in the formats they understood. Staff explained information in ways people could process, including Makaton.
- Staff told us, "It is most important for us to know and understand people's communication needs, as this is key to understanding their behaviour."

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

- The provider responded well to people's social needs. People were supported to be included in the community, establish relationships and avoid isolation. People were assisted to visit or keep in touch with family and friends who were regular visitors to the service.
- Staff encouraged people to find and take part in activities and maintain pastimes and occupation, such as eating out, walking, music and dancing, photography using I-Pads and going to the pub.
- Activities were tailored to people's choices. People were assisted to learn living skills, as well as enjoy community-based entertainments and pastimes.

Improving care quality in response to complaints or concerns

- The provider listened and responded well to complaints. They addressed them appropriately so that improvements could be made to people's quality of life.
- People and families had a written and pictorial complaint procedure to follow to make formal complaints.
- The complaint policy and procedure were understood by staff, who resolved issues where possible, or

passed them on to the registered manager when necessary.

End of life care and support

- Staff had knowledge of end of life care and access to support from health care professionals, should this be needed.

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 and staff promoted a friendly, positive culture. Staff said, "We like coming to work because we all get on well and find it rewarding to support the people that live here." People experienced good outcomes in a service where their individual needs were understood and met.

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

- The provider and registered manager understood their responsibility to be honest about the service they provided. They understood about accountability, being open to scrutiny and making apologies when things go wrong.
- Staff understood and were committed to the person-centred approach within the service. They said, "We can all learn something each day that helps us do a good job for each person that lives here."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Staff were clear about their roles. They provided a quality service, managed risk, learned from shortfalls and improved the service delivery.
- Quality checks and audits were completed as per the requirements of the organisation. They led to action plans, which addressed any shortfalls and records then showed when action was completed.
- Staff and management meetings were held and used to share practice and knowledge. All information gathered on the quality of the service was analysed and used to plan future improvements.
- People's lives had been improved over the years by maintaining the levels of support they needed, keeping staff as consistent as possible and enabling people to lead the lives of their choosing.
- The registered manager met the regulatory requirements of their registration and informed CQC of significant events that happened in the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People, relatives and staff were issued with satisfaction surveys to complete. The information these produced was analysed by the provider to determine shortfalls and areas for improvement, which were then addressed. Information in the last survey carried out showed positive returns from those who responded.
- People, relatives and staff had their equality characteristics considered when any information was being

collected from them and they were being asked to get involved in the service.

- Effective staff working relationships with other organisations and professionals ensured people received the support they needed. People maintained relationships with friends and used community facilities and services to socialise with those in their community. They had their own transport and met with family as they wished.