

# Walsingham Support

# Walsingham Support -Wedgwood Road

#### **Inspection report**

44-52 Wedgwood Road

Flimby

Maryport

Cumbria

**CA15 8QX** 

Tel: 01900812863

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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

Wedgewood Road provides personal care to up to four people living with autism. People live in their own tenanted properties on the site. Care is provided up to twenty four hours a day as people have complex needs and may have to live with behaviours that can be challenging to themselves and others.

This was an announced inspection that took place on 19th September 2017. At the last inspection in September 2015, the service was rated as Good. At this inspection we found the service remained Good.

The service had a registered manager who also manages another service for Walsingham. 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.

Staff had received training on ensuring people were kept free from harm and abuse. They were confident in management dealing with any issues appropriately. Walsingham had a confidential phone line for staff to report any concerns.

Good risk assessments and emergency planning were in place. Accidents and incidents were monitored and we noted that these had lessened in this service.

We saw that staffing levels were suitable to meet the assessed needs of people in the service. Staff recruitment was thorough with all checks completed before new staff had access to vulnerable people. The organisation had robust disciplinary procedures in place.

Medicines were well managed. People had their medicines reviewed by their GP and specialist health care providers.

Staff were trained in infection control and supported people in their own environment.

We had evidence to show that the staff team at Wedgewood road were supported to develop appropriately. Staff were keen to learn and we saw that induction, training, appraisal and supervision helped them to give good levels of care and support.

Staff received good levels of training around principles of care in relation to people living with a learning disability and/ or autism. They were trained in specific techniques to support each person. They also had general training on supporting people with behaviours that challenge. Restraint had not been used in this service. Consent was sought, where possible. The manager and the local authority worked together to ensure the service operated within the Mental Capacity Act 2005

People were supported to get good health care support from their own GP, specialist nurses and consultants. Staff worked with people to support and encourage them to visit dentists and other health care providers.

People in the service lived in their own specially adapted tenancies that were secure and safe for people living with their particular disorder.

Staff we spoke to displayed a caring attitude. They understood how to support people and help them maintain their dignity and privacy. Staff showed both empathy and respect for people living with the symptoms of autism. People in the service had access to advocates.

Everyone supported by the service had been appropriately assessed. Each person had person centred plans, behavioural plans and support plans that staff followed closely. New plans had been put in place that were comprehensive yet were easy to follow.

People were encouraged to go out and to engage, where possible, with sport, learning and social events. Staff were aware of how difficult this was for people and planning for activities was done slowly and in depth.

Complaint procedures were in place. There had been no complaints received about the service.

The service had a suitably experienced and qualified registered manager. The day to day management was delegated to a location manager and a deputy manager who were also suitably qualified and experienced. Staff said that management visited the service regularly and were aware of how things were in the service. Staff understood the scheme of delegation.

Staff displayed the values that Walsingham's managers expected. The staff team understood the needs of people with autism and worked within the culture of the organisation.

Wedgewood Road followed the quality monitoring processes of the organisation. There were regular internal and external audits of all aspects of the service. Changes were put into place after evaluation of the service.

Good recording systems were in place and these covered all the support needs of the people in the service.

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.					
Staff understood their responsibilities in keeping people safe and free from harm.					
The service had suitable staffing levels in place.					
People were given appropriate support to take their medicines.					
Is the service effective?	Good •				
The service remains good.					
Staff received suitable levels of training and support.					
There was a good understanding of how the Mental Capacity Act 2005 related to people living in their own tenancies.					
The mental and physical health needs of people were well supported.					
Is the service caring?	Good •				
The service remains good.					
Staff showed genuine acceptance and caring approaches.					
Advocacy could be arranged if necessary.					
Is the service responsive?	Good •				
The service remains good.					
Assessment and re-assessment of need was detailed and up to date.					
Care planning had been developed to a very high standard.					
Issues around deprivation of liberty were dealt with					

appropriately.

	•		
is the	service	well-	led?

Good



The service remains good.



# Walsingham Support - Wedgwood Road

**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 19 September 2017 and was announced. We planned the visit with the registered manager as this is a small service and we needed to be sure that staff and service users would be at home. The inspection was carried out by one adult social care inspector.

This is a small service which is managed in tandem with Walsingham Support West Cumbria Domiciliary Care. This service is a specialist service for the four tenants in the property. People who live in the service have a learning disability or have a diagnosis of autism. The people who live at Wedgewood road also have had some difficulties managing their emotions and behaviours due to their disorders. This means they need very specialised support packages.

This meant that these four people do not always find it easy to communicate verbally with people they do not know. People were asked but no one wanted to talk to us on the day. We saw two of the four people who lived in the flats and had very brief exchanges with them. We spoke to one person by telephone after the inspection.

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. We also reviewed the information we held about the service, such as notifications we had received from the registered provider. A notification is information about important events which the service is required to send us by law. We also spoke with social workers, health care practitioners and commissioners of care. We planned the inspection using this information.

We read all four care files and also looked at health care files and person centred plans. We read in depth all four specialised plans for managing behavioural issues. We checked on medicines managed on the behalf of people who lived in the home. We also looked at individual menu plans, daily and weekly planners and daily notes.

We met five members of staff, the registered manager and a location manager on the day of the visit. We read three recruitment files and four staff development files when we visited the main office.

We also looked at quality monitoring records, records related to fire and food safety and records of individual financial transactions.



#### Is the service safe?

#### Our findings

The person we spoke to by telephone told us that everything was "Fine...no problems" and that they felt safe and secure in their flat with the staff who gave the support.

We met with staff in the service who could talk about their responsibilities in relation to safeguarding. They told us that they had on-going training in safeguarding and that this was also discussed in supervision and in team meetings. Walsingham had a 'whistleblowing' phone line that staff could call anonymously if anything worried them. The management staff understood how to make safeguarding referrals to appropriate agencies.

There were suitable risk assessments and risk management plans in place for each person. There were also contingency plans in place because the people the staff supported could potentially have major issues that would need careful management. There had been no incidents and no safeguarding since before our last inspection.

Each member of staff was allocated to one of the tenants and we saw that the hours allocated to each person were suitably covered. Staff said that there were enough of them to give people support.

We looked at recruitment in the service and spoke to members of staff who confirmed that background checks were made prior to them having any contact with vulnerable people. We had evidence to show that Walsingham recruitment was done appropriately to protect people. One person in the service was involved in the recruitment process.

Walsingham had suitable disciplinary procedures in place and we had evidence to show that the registered manager followed these when necessary. There had been no disciplinary action taken in this service.

Each person had different procedures in place for their support in taking medicines. Staff understood these and we saw good records of medicines. We checked records and one person's medication. These were in order. Some medicines were prescribed by GPs but some of the stronger medicines were prescribed by psychiatrists and monitored by the staff and by the specialist community learning disability nurses.

Staff had suitable training in infection control and care files showed how they supported people to follow good hygiene processes.



#### Is the service effective?

#### Our findings

The one person who spoke with us told us that the staff were, "All very good."

We checked on the training records for the service and we saw that all the staff had completed the training that the provider deemed to be necessary for support workers. We also saw that each person had received training in understanding autism, learning disability and managing behaviours that challenge. Each team member had attended training from a psychologist who specialised in the field.

We saw that staff had regular supervision and appraisal. Staff confirmed that they were given good support to develop in their role. We saw records which were detailed, related to the work people did and helped them to widen their knowledge.

We spoke to staff who told us how important it was to communicate with each other because of the precise and systematic approach they had to give to people in the service. They told us that they discussed issues together and gave detailed handovers to each shift. We heard some of these detailed exchanges when we visited.

Staff in the service understood their responsibilities in relation to the Mental Capacity Act and, where appropriate, the Mental Health Act. People who lived in the service needed to have very individualised support and the staff team did consider that they deprived all four people of their liberty to an extent. The purchasing social workers and mental health professionals directed these restrictions and these were within the remit of both acts.

All staff were trained in supporting people who may display behaviours that challenge. No one had ever been restrained in this service. Staff told us they followed the behavioural approaches used "to the letter". The records gave us evidence to show that this approach was effective and that incidents had decreased with no incidents in the last twelve months.

Each person was supported to participate in shopping, cooking and managing their own dietary needs, wherever possible. Staff told us that if people were not eating well they would take advice from dieticians and other professionals. Food preferences and nutritional needs were recorded in care plans. No one had problems with maintaining a healthy weight but staff continued to encourage healthy eating.

We looked at the care files for everyone who was supported in this service. We had evidence to show that people received suitable health care support. Each of the tenants had appropriate support from psychiatrists and psychologists who were specialists in the care of people with autism. They also had regular contact with the local GP's and community nurses. Staff encouraged and supported people to go to appointments with other health professionals.

People who lived in these tenanted properties had specially designed interiors that met their needs and enhanced their well-being.



## Is the service caring?

#### Our findings

People who were supported by the service did not wish to engage with us during the inspection so we made some observations from a distance and we also spoke with one person by telephone. This person told us that the staff were, "Ok...I think they care about me. They are good with me."

We spent time with the staff team on duty during our visit. They spoke about people with warmth and affection. They were clear and objective when discussing the individuals they supported and no one made any judgemental statements. Care files were written clearly and without judgmental or prejudiced statements. We observed genuine acceptance and caring. Staff displayed appropriate values when talking about people with learning disabilities and people living with autism.

People who lived in Wedgwood Road could access advocates where necessary. Some people had relatives who would act as advocates on their behalf when necessary. The staff team worked with families in an open and appropriate way.

Staff understood the need for confidentiality and privacy. Staff gave examples of how they encouraged people to maintain their dignity during personal care support. People were given their own space within their flats and staff timed interventions to allow this to happen safely.

Every aspect of the care and support given was described in the very complex and detailed care planning. This work was done with the guidance of a professor of clinical psychology. Staff worked within these parameters when building relationships with people they supported.



#### Is the service responsive?

#### Our findings

The person we spoke with was aware of their care plan and told us that they had been involved with the planning. They also discussed their activities and said, "I go out...didn't see you when you came as I went to Carlisle to buy clothes. I had a good day out."

We spoke with a social work manager who was happy with the way the service operated. He told us, "Wedgewood Road is a well established service managing some people with complex needs. It runs well with a relatively low level of support from my team considering the complexity of the people living there."

We read all of the care files on the four people who received support from the Walsingham staff team. We read care plans that were detailed and appropriate. We noted that assessment of need was on-going and that suitable changes had been made to the support given when necessary. Care planning was done together with social workers and by psychiatrists or psychologists. We saw that each person had details in their file for dealing with any problems or difficulties that might arise. These contingency plans included how to contact health and social care professionals in an emergency.

We saw in the review of care planning and in the daily notes that the people who were being supported were very settled in this service. There had been no major issues with any of them and there had been some positive changes noted. We could see that the use of structured care planning had allowed people to have a settled life.

Care planning had been reviewed and a new system introduced. This new system of "Positive Behaviour Support" (PBS) gave staff an understanding of risk using a 'traffic lights' approach. The plans encouraged staff to support people to stay in the 'green zone'. This system allowed the care planning to be easy to follow, whilst also including all the minute details of how to follow people's routines. This helped people's anxieties to lessen and we saw that this had made changes to the behaviours that challenge. The support plans also had a separate 'blue zone' used for review and reassessment. We judged the care planning systems to be of a very high standard.

People had individual weekly planners that gave them a structure to each day and fitted into the 'green zone' approach. Some people went out to shop and to activities. A great deal of planning went in to these individual activities. The staff had made arrangements so that activities could be undertaken without unsettling the individual.

Activities, hobbies and entertainment were individualised and were arranged around the preference and ability of each person.

The service had a suitable complaints procedure and service users had access to this in an easy read format. There had been no formal complaints received.



## Is the service well-led?

#### Our findings

The person we spoke to told us that they saw the management team regularly and could be involved in decision making about services if they wanted to. They said, "I can help them when they are looking for new staff and I go to meetings where I can have my say. I go to the office to see what's going on."

The service has a manager who is registered with the care quality commission. She also manages Walsingham Support West Cumbria Domiciliary Care and currently Wedgewood Road is a standalone service as it is the most specialised part of the operation in west Cumbria. The registration is being reconsidered as records for the service are now electronic.

The registered manager was suitably qualified and experienced to run this service. The service is managed on a day to day basis by a location manager and a deputy manager. A social work manager told us, "The manager has a 'can do' attitude and is always willing to consider creative ways of supporting us and the people we work with". She ensured that there was a settled team because of the unique approach that needs to be taken with the four people who live in the flats.

Staff told us that they got very good levels of support from management and that, as one member of staff told us, "The manager keeps thinking about ways to make things better for the people who use the service." The staff we spoke to understood the quality monitoring processes and each understood their responsibilities as part of a total quality monitoring process.

We also spoke with staff about the values and behaviours that the provider expected of the staff. They could discuss these with us and we saw examples of adherence to these with staff talking positively about people and having a good understanding of autism, behavioural challenges and person centred care. They told us that management took the lead in promoting positive values.

We learned that improvements were made as a result of on-going quality monitoring in the service. There were regular internal and external audits of quality in place. Walsingham had a quality assurance system which was used throughout the country in all their services. We looked at the policies and procedures and at quality standards and monitoring records. Each month at least one senior officer of the organisation completed an audit of different aspects of the care and support systems in the service.

We looked in depth at the quality audits for the service for the year prior to our visit. These were done by the quality and projects officer and the audits were recorded in depth. She checked on how well the service met Walsingham's standards. We saw that this service met all the quality standards of the provider. We also noted that the registered manager had made changes to rostering of management cover and that recruitment and deployment of staff had changed as a result of quality monitoring.

We checked on a wide range of records in the location and at the office base. We noted the improvements to content, approach and layout of case files and care planning. We also saw that all care plans for this service were held electronically and could be accessed by management staff even when they were not in the

location. Staff records were of a good standard and held in the office.