

# Saint John of God Hospitaller Services

## Terry Yorath House

### 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

Terry Yorath House is a 'care home'. People in care homes receive accommodation and personal care under a contractual agreement. CQC regulates both the premises and the care provided and both were looked at during this inspection.

Terry Yorath House offers ten permanent and two short stay places for adults with profound physical disabilities. The centre is located in a small housing estate that is in Leeds, near Roundhay Park and local shops, pubs and a health centre. At the time of our inspection, 11 people were using the service.

At our last inspection we rated the service Good. At this inspection we found the evidence continued to support the rating of Good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

This inspection took place 23 and 26 February 2018. The inspection was unannounced on the first day; this meant the staff and provider did not know we would be visiting.

A registered manager was 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. People continued to receive care which protected them from avoidable harm and abuse. Staff met people's needs in a safe way and were, available when people needed and wanted support. Plans to improve staffing levels were in place. Systems for managing medicines safely were overall, effective. The registered manager responded swiftly to some issues we identified with medicine support to ensure safe medicine management. There were systems in place to make sure managers and staff learnt from any incidents such as accidents..

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's health needs were met well. People were encouraged to eat a healthy, balanced diet of their choice. Staff had received training and support which gave them the skills and knowledge to meet people's individual needs.

People told us they were treated well. We saw people were supported by kind and attentive staff; many of whom had worked at the service for a number of years. This meant people had continuity of care. Staff respected people's privacy, treated them with dignity and encouraged them to be as independent as possible.

Person-centred care plans had been developed with people's involvement. Care plans and risk assessments were updated as people's needs changed to ensure staff were fully aware of people's needs. People were supported to spend their time how they wanted to and were encouraged to maintain their social interests within the local community. People knew how to raise concerns if they were unhappy.

The provider had systems in place that continued to be effective in assessing and monitoring the quality of the service provided. The management team showed a commitment to running a well-led service for the benefit of the people who used it. Staff understood their roles and responsibilities and said they felt well supported by the management team who were open and approachable.

Further information is in the detailed findings below.

## 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 Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Terry Yorath House

## 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 comprehensive inspection took place on 23 and 26 February 2018. It was unannounced on the first day and was carried out by one inspector and an expert by experience who had experience of services for people with a physical disability. 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 our inspection, we reviewed all the information we held about the service, including previous inspection reports and statutory notifications sent to us by the provider. Statutory notifications contain information about changes, events or incidents that the provider is legally required to send us. We contacted the local authority, other stakeholders and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

Before the inspection, the provider completed a Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we spoke with seven people who used the service, three relatives, three staff, the deputy manager, the service manager and the registered manager.

We spent time looking at documents and records related to people's care and the management of the service. We looked at three people's care plans and three people's medicines records. We also looked at staff training and recruitment files, a selection of the home's policies and procedures, quality assurance and auditing processes, meeting minutes, maintenance and fire safety records.

# Is the service safe?

## Our findings

At our last inspection of the service we found the service was safe. At this inspection we found the service remained safe.

People told us they felt safe living at Terry Yorath House. One person said "I feel safe and well looked after here." People told us their personal property was safe and they were able to lock things away if they wished. One person said, "People don't pinch things here." A relative told us they felt re-assured their family member was safe at the service. They said, "I have great peace of mind knowing our [Name of family member] is safe here; it's a wonderful place."

People were overall, supported by sufficient staff to meet their needs. The registered manager told us they had been working with the commissioners of the service to gain additional funding to increase staffing levels. At the time of our inspection, this had been granted and with immediate effect a third staff member was added to the night staffing arrangements to ensure people's safety. The registered manager had also commenced recruitment for additional day time staff based on the individual needs of people who used the service. Staff told us this additional staffing was welcomed and needed to enable more one to one support and leisure outings for people. People told us the staff were busy but met their needs. One person told us if there were going to be times when they had to wait, staff kept them informed of why they were held up. Other comments about the staff we received included; "They come straight away", "They respond in a minute, maybe two", "They have some time to chat, but they are extremely busy" and "We could do with more staff, they have to work extremely hard."

We looked at medicines management and found overall this was safe. People's skills were taken into consideration and independence was promoted when people were assessed as having the necessary skills to manage their own medicines. People who required support with medicines told us they had their medicines as they needed them. People's medicines were stored safely. We looked at three people's medication administration records (MAR). MARs had been completed to show people received their medicines as prescribed. Some people were prescribed 'as and when required' medicines or creams. We found some guidance for these medicines was in place but needed more personalisation regarding people's individual needs for these medicines. The registered manager addressed this during our inspection by updating the records or contacting a GP to clarify instructions for one person's medicine. Staff who administered medicines received training and their competencies were assessed regularly.

Staff were aware of their responsibilities for keeping people safe from abuse and avoidable harm. They told us they felt confident anything reported would be acted upon by the management team and provider. Safeguarding was a topic covered in all meetings within the service to ensure a good awareness of how to keep people protected from harm or improper treatment. The provider operated a safe and effective recruitment system. We saw all the necessary pre- employment checks were carried out before staff commenced their employment.

Risk assessments were in place to address and manage risk. Risk assessments were person centred and gave good guidance on how to maintain people's safety while also promoting their independence.

The home was clean and infection control was maintained. We found equipment in use had been serviced and maintained as required.

Accidents and incidents were recorded. These records were audited and analysed to identify what had happened and actions that could be taken in the future to reduce the risk of reoccurrences.

# Is the service effective?

## Our findings

At our last inspection of the service we found the service was effective. At this inspection we found the service remained effective.

People were supported by staff who understood their needs and had the skills to support them well. People made positive comments about the level of training of the staff and the life quality they provided. One person said, "There is a good training program, staff are kept up to date." Another person said, "Staff are trained well enough, they are always on courses."

People had their care and support needs assessed prior to them moving into the service or commencing use of the service for short stays. We reviewed the design and adaptation of the service and found it was adapted to meet the assessed needs of people who had a physical disability. This included the use of technology such as movement sensors to open doors and adapted baths and showers.

Staff received an induction into the service when they first started working there and relevant training was provided. Staff told us they felt confident in their skills because they had time to get to know people well and had training that was specific to people's needs. Staff training was up to date and staff received support to carry out their roles through supervision and appraisal.

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. The authorisation procedure for this in care homes is called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA. We saw people's decision making ability was assessed and monitored. Consideration had been given as to how staff needed to support each person to make their own decisions. Where decisions had been made on behalf of people we saw the MCA process had been followed and best interest decisions made were clearly recorded. Staff understood the importance of the MCA in protecting people and the importance of involving people in making decisions. The registered manager had submitted appropriate DoLS applications and had systems in place to check on those waiting to be authorised.

People were supported to have enough to eat and drink and maintain a well-balanced diet. Everyone we spoke with made positive comments about the cooking and quality of meals. One person said, "There is a good selection, the chef is very accommodating in making an alternative." Another person said, "The food is very nice, enough to eat, plenty of choice." Systems were in place to assess and monitor people's risks and needs in relation to eating and drinking. Speech and language therapists were involved in carrying out assessments and guiding staff on how to support people who were at risk of choking, malnutrition or other



diet related concerns.

We observed the tea time meal on both days of the inspection. Staff were well organised and assistance was given in a caring way with plenty of positive interaction between people and the staff. People were encouraged to be as independent as possible and were not rushed. Food looked appetising and people told us they enjoyed it.

People told us they had good access to health care professionals. One person said, "They (the staff) sort things out, the staff phone up to make appointments etc." People's relatives were very positive about the healthcare support their family members received. One relative said, "I have every confidence; they are very prompt when medical attention is needed. Nothing is left to chance."

# Is the service caring?

## Our findings

At our last inspection of the service we found the service was caring. At this inspection we found the service remained caring.

People who lived at the service and relatives told us staff were kind and caring in their approach. Feedback included, "They are kind, treat you with respect and caring" and "Everyone is nice, they are fantastic, I wouldn't want to live anywhere else." Throughout the inspection we observed positive interactions between people who lived at the service and staff. Staff were attentive to people's needs and respectful. Staff took time to make sure they had understood what people were saying; they used a variety of ways of communicating with people and showed patience and understanding if people had communication difficulties. There was a lively and comfortable atmosphere in the service; it was clear people had developed good relationships with staff. We saw staff treated people as equal partners which showed how much they valued people who used the service.

Staff respected people's dignity and privacy. One person told us, "They knock on the door before entering." We saw staff respected people's privacy and own space. People moved about the service freely and staff were present to support people but they did not intrude or interfere in what people were doing. Staff were confident they provided good person centred care and gave examples of how they ensured people's privacy and dignity was respected.

People told us they were consulted with, listened to and made decisions about their support. One person told us, "I am involved in discussions about my care, I decide things for myself." During our visit we saw people choosing how to spend their time, whether to attend a social activity and what to eat and drink. A relative told us, "Our [Name of family member's] decisions are respected by staff. [Person's name] can do as they please." People had access to independent advocacy services. These services support people to be involved in decisions about their care and support and protect people's rights.

The staff team were knowledgeable with regards to the people they supported. They knew people's preferred routines and how they wished to be supported. Staff were able to tell us about the people who used the service. They knew their likes, dislikes, support needs and things that were important to them such as family and background. A person who used the service told us, "They know me extremely well. They have the time to listen to things you want to say."

People told us they were encouraged to be as independent as possible and they welcomed the support they received to achieve this. One person said, "They let me do what I feel I can do." Staff told us the provider placed great importance on promoting and maintaining people's independence. Care records contained detailed information about how staff could support people's independence.

People told us they were treated equally. One person said, "Everybody is treated equally and respectfully." The provider had policies in place in relation to protected characteristics under the Equality Act 2010. Staff told us people's diverse needs in respect of the seven protected characteristics of the Equality Act 2010; age,

disability, gender, marital status, race, religion and sexual orientation were met where applicable. We saw no evidence to suggest that anyone who used the service was discriminated against and no one told us anything to contradict this.

# Is the service responsive?

## Our findings

At our last inspection of the service we found the service was responsive. At this inspection we found the service remained responsive.

People experienced care and support that met their needs and preferences. People's care plans were person centred because they contained information about their life history; who and what mattered to them and their hobbies and interests. Staff were provided with detailed clear guidance on how to support people as they wished. We saw care plans showed evidence of people's involvement in developing them. One person told us, "I have seen and agreed my care plan." Another person said, "I am involved in my care plan, it's reviewed every six months." A third person said, "I am supported in the way it says in the plan."

Care plans were reviewed regularly and in response to any changes in people's needs. People's end of life care plans had been discussed sensitively with them and their family where appropriate. Some people had chosen to document their wishes and arrangements. Other people had said they did not feel it was the right time in their life to do this. Their views had been respected. Staff told us the care records gave them enough information to enable them to know what they needed to do to meet people's individual needs. One staff member said, "There is everything you need in the care plans to help you support people properly."

The service had a complaints policy in place and there were systems in place to ensure complaints were investigated. People and their relatives told us they had no complaints, but were confident any complaints would be taken seriously and resolved promptly. One person said, "I haven't complained over the last year, I would talk to my key workers." Another person said, "I know how to (complain) if it is needed but it hasn't been needed." Staff were aware of the process to follow should someone raise a complaint.

The provider looked at ways to make sure people had access to the information they needed in a way they could understand it. The provider had made written information easier to understand for people who required this. We saw the complaints and compliments procedure was written using pictures and symbols to aid people's understanding.

People completed a range of activities in and outside the service. The service had its own adapted minibus, which helped to keep people involved with their local community, friends and families. Most people were positive about the level and quality of the activities. People's comments included, "I go to college, I go out, I choose what to do" and "We have barbeques, bingo nights, I can do my own thing, I go out a lot". Everyone was happy that they could maintain interests and friendships. One person told us of the voluntary work they did. This involved working with a local organisation to raise awareness on accessibility for people with physical disabilities. The registered manager told us another person was a board member of the physical and sensory impairment team. Their work involved giving talks and advising other services on physical disability issues. The registered manager had recognised this person's contribution and nominated them for a local awards scheme.

People had their own individual activity plans which were developed with them according to their interests.

One person told us they didn't think there was enough to do at weekends. They said, "Group activities are thin on the ground, we used to go to the pub, but the lack of staff has stopped this." The registered manager said the recently agreed increase in staffing levels, as referred to in the safe section of this report, would ensure more staff were available to increase activities for people.

# Is the service well-led?

## Our findings

At our last inspection of the service we found the service was well led. At this inspection we found the service remained well led.

The service had a registered manager in post at the time of our inspection. The registered manager had relevant experience in health and social care. They had a good knowledge of people's needs, likes and dislikes, as well as the day-to-day running of the service. They were aware of and understood their regulatory responsibilities.

People all told us they felt the service was well run and the registered manager and deputy manager were very approachable. People's comments included; "The manager is very approachable, [they] listen, [they] chat about anything, open and honest", "Runs like clockwork here, very organised, good approach", "We all like the new manager, [Name] has settled in well and is doing a good job" and "[Name of deputy manager] knows everything there is to know and will always advise on anything." Staff told us they were well supported by the registered manager and deputy manager. It was clear staff were fully aware of their responsibilities and had a good understanding of providing a person centred service. One staff member said, "We get really good support, never afraid to ask questions [name of manager and deputy manager] make sure this service is run for the people who live here. It is all about them and so it should be." Another staff member said, "I love my job, it's a great place to work."

The service worked well with other agencies and services to make sure people received their care in a joined up way. This included working with district nursing teams, speech and language therapists and occupational therapists. The registered manager was also a member of the local registered manager's network. This enabled them to be kept up to date on good practice issues.

There was an effective quality assurance system in place. This meant the service was continually improving. Checks were carried out on a daily basis to ensure people's medication had been administered safely and the premises were clean and safe. The registered manager completed daily, weekly and quarterly checks in a number of areas of service delivery. These included; medicines, security, finances, care records, cleanliness and health and safety. Senior managers also visited the service to check and report on standards and the quality of care being provided. We saw where quality checks highlighted areas for improvement there were action plans in place to drive change and ensure improvements were made.

People were encouraged to share their views and put forward ideas of how the service could improve. The provider asked people who stayed at the service on a temporary basis to complete guest feedback forms at the end of each visit. Those we looked at showed people were very satisfied with the service. The provider also conducted an annual survey for people who used the service and relatives. We looked at the results of the most recent surveys, undertaken in 2017. These showed a high degree of satisfaction with the service. Any suggestions for improvements were acted upon.

'Parent/Carer' and 'Residents/Carer' meetings were held regularly. People told us they felt actively involved

in the running of the service. People said they attended meetings but also said they could speak with the management team at any time. One person said, "They do listen and change things if they can."