

Watford And District Mencap Society

Hillside

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

About the service: Hillside is a care home. People in care homes receive accommodation and personal care under one contractual agreement. CQC regulates both the premises and the care provided and both were looked at during this inspection. Hillside provides a service for up to 8 adults with a learning disability. At the time of the inspection there were people 8 living at the service.

Accommodation is provided in one large detached house over two floors. People have access to communal areas.

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 however, there were elements of this. Registering the right support 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.

There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home.

People's experience of using this service:

The majority of people who lived at the home were able to communicate verbally but for people who were unable to speak to us we observed staff supported them with a range of communication aids. These included sign language and interpreting people's body language with regards to meeting their needs and wishes.

At the last inspection we found that not all risks had been fully assessed or mitigated and people had been placed at risk. This included the use of a door wedge which would have increased the risk to people if a fire broke out at the home. However, at this inspection we found all risks in relation to people's health, safety and welfare had been identified and action taken where appropriate. This included risks associated with bathing and the safe administration of medicines. Staffing levels were appropriate to meet the needs of the people using the service. Medicines were safely managed. There were systems in place to monitor incidents and accidents and learn from these.

At the last inspection we found that several areas of the home were in a state of disrepair. However at this inspection we found that the environment had been greatly improved. With several areas of the home being refurbished, which included a newly fitted kitchen, new soft furnishings have been purchased, all bedrooms have been re-decorated, carpets have been replaced throughout and new windows fitted on the first floor of the home. Also, several areas of the home had been re-carpeted and additional skylights have been fitted to provide more natural light into the home.

Staff were competent and knew the people they supported well. People's care, health and cultural needs were identified so staff could meet these. People had their nutritional needs met. People were supported to maintain good health. Staff made referrals to health professionals when required. Staff worked within the principles of the Mental Capacity Act (MCA) 2005 and ensured people consented to their care.

People received care from staff who were kind and caring. People's privacy and dignity was protected and promoted. People had developed positive relationships with staff who had a good understanding of their needs and preferences. One relative said. "[name] loves living at Hillside. The staff are all very proficient and lovely. Its home from home."

People took part in a range of group; one-to-one activities depending on their preferences and also had the opportunity to enjoy annual holidays away from their home. Information was displayed on how to make a complaint and in a pictorial format, that could be easily understood. Relatives also told us they knew how to complain.

People, visitors and staff told us the service was well managed and had an open and friendly culture. Staff said the service had a family atmosphere and they felt well-supported. The registered manager and staff worked in partnership with other agencies to ensure people got the care and support they needed. One staff member said, "I think the [registered manager] is excellent and gives every ounce of their energy and commitment to the people who live at Hillside as well as supporting all the staff very well." They are one of us and make us feel valued and respected for the job we all do."

Rating at last inspection: Requires Improvement (report published 16 May 2018).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected: This was a planned inspection based on the rating at the last inspection.

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.

Hillside

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

The inspection team consisted of one inspector.

Service and service type

Hillside is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. 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 Care Quality Commission. 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.

Inspection activity started on 16 May 2019 and ended on 3 July 2019.

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 used on-going monitoring such as information received from the service since the last inspection. We used all this information to help plan our inspection.

During the inspection we:

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with four members of staff including the registered manager and care workers.

We reviewed a range of records. This included three people's care records and three medication records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 12.

Systems and processes to safeguard people from the risk of abuse.

- The staff received training on safeguarding adults and abuse awareness.
- Staff said, "We have brilliant training in safeguarding and whistleblowing. I know the process to follow if I have any concerns about the welfare of people at Hillside. The registered manager also gives us on the spot advice and training about what to look out for in respect of abuse." One relative told us that they felt their family member was very safe at Hillside and if they had any concerns they would approach the registered manager and call social services if they ever had concerns about abuse.

Assessing risk, safety monitoring and management.

- The registered manager wrote, reviewed and updated detailed risk management plans.
 - The registered manager directly communicated changes in care needs to staff to ensure understanding.
- We reviewed individual risk assessments, which included road safety, bathing and the risk associated with behaviour that may challenge and found all documents had been updated and reviewed within the past six months.

Staffing and recruitment

- The registered manager had robust recruitment policies and processes in place to ensure that staff were suitable for the role.
- The staffing levels were based on people's assessed needs and were safe. When the service had staff vacancies these were filled with regular and reliable agency staff members.
- Staff had the right skills and experience for the role. We saw recorded evidence that the registered manager regularly assessed staff competencies, which included the administration of medicines and the staff's knowledge with regard to safeguarding people from harm.

Using medicines safely

- The provider had a detailed system in place for the monitoring and auditing safe management of medicines.
- Staff were trained and assessed in medicine administration and theory to ensure competence.
- Each care plan had information on the medicines used and known side effects to better inform staff.
- One relative told us, "All the staff at Hillside are very competent and when (name) comes home we are always given the correct medication, no worries there." We carried out a check of the medicine administration records (MAR) for all seven people and found these all to be accurate and up to date with no gaps found. The registered manager also carried out regular audits of people's medicines to ensure any

discrepancies were found at the earliest possible stage.

Preventing and controlling infection

- One staff member confirmed to us, "Gloves and aprons are always available for us to use. We know we must use these to prevent the spread of infection. We put them in the appropriate bins, when necessary."
- The registered manager completed regular infection control audits which ensured that any issues or areas of concern were identified at the earliest possible stage and rectified.

Learning lessons when things go wrong

- The service had not yet experienced incidents. However, the registered manager had a good understanding of processes for learning from when things went wrong.
- The registered manager researched the latest concerns and developments in the wider care environment and used these to shape the quality of care provided.
- The registered manager told us, "We are all responsible for ensuring we always minimise the risks to people. I make sure that all the documentation is up to date and has been reviewed. If errors are made, for example the administration of medicines we have a robust procedure to follow which includes staff members having their competencies checked, monitored and reviewed, to avoid further errors occurring."

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 our last inspection the provider had failed to maintain a safe environment. This was a breach of regulation 15 (Premises) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 15.

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

- There were thorough systems in place for conducting initial assessments.
- Assessments covered aspects of choice, preference, beliefs, health and wellbeing.
- The registered manager developed people's care plans and risk assessments in line with their assessed needs.

Staff support: induction, training, skills and experience.

- The registered manager used a robust induction programme for new staff which included shadowing and being observed and assessed as competent before they worked unsupervised. One staff member commented, "I am just working through my induction now and have only been here three weeks, but so far I am loving it. I feel very supported by the (registered) manager and all the other staff. The induction is thorough and gives me a good idea into what the job entails." We saw that three staff were currently working towards their NVQ levels qualification 2- 5.
- Staff were provided with training in all areas required for their role. The registered manager provided evidence that each member of staff had completed their mandatory training with the required timescales. Additional training provided included epilepsy training, training in managing people whose behaviour that challenged and in autism.
- The registered manager assessed staff's skills and experience as part of both individual one to one supervision sessions and annual appraisals. All four staff we spoke to considered the registered manager was very supportive and they valued their expertise and knowledge in relation to the service provided to people. One staff member told us, "They know so much about everyone who lives at Hillside and often work alongside us to help guide and support us, especially if there are situations that can be quite challenging. This makes me feel more confident that I could manage a similar situation if it arose."

Supporting people to eat and drink enough to maintain a balanced diet.

- People's weights were monitored and any other dietary needs. When required, health care professionals were referred to for guidance; for example, when people required support with reducing their weight and to promote healthy eating.

One person told us, "I love the food here, we get lots of choice and also we can have takeaways if we want. I like fish and chips best." We observed the main meal being prepared and served with a staff member and one person who lived at Hillside. We saw this person enjoyed the opportunity of helping and serving the meal to the rest of the group. Everyone told us that this meal was both tasty and fulfilling. One person said,

"This is one of my favourite meals, chilli." One relative we spoke with told us that (name) always enjoyed the meals provided by the home and found the standard of meals very good. Two people confirmed that they could choose what they liked to eat and drink.

Supporting people to live healthier lives, access healthcare services and support

- There was clear evidence of referrals being made to a range of health care professionals and their guidance was included in the planned care needs. The GP practice was close to the home.
- Relatives told us they felt informed when healthcare advice was obtained. One relative said, "The (registered) manager always lets me know if there are any health problems and we have every confidence in all the staff that if there were any concerns they would always contact the GP for advice." We saw two examples where the registered manager and staff had worked hard and in conjunction with both the emergency surgical unit and in-patient services to support people who had required admissions into hospital for treatment. This had helped reduce people's anxieties and led to successful treatments and discharges back to the home.

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

- The home had a variety of communal areas which people could access. When people required specialist chairs and equipment we found these were available.
- People were able to personalise their own bedrooms and were also involved in choosing the colour schemes for the communal spaces. The recent refurbishment and adaptations to the home had created a very welcoming and pleasant environment in which people could enjoy, relax and live safely.

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 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 application procedures for this in care homes and hospitals are 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 authorisations to deprive a person of their liberty were being met. Where people did not have capacity to make decisions, they 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.

- People confirmed that staff asked for their consent before any care was given. One staff member told us, "I always make sure I ask the person before I do anything with them, this is basic human right and offers people at Hillside the respect they deserve. The training we are given with regard to consent and people's capacity focusses on making sure we always get the persons permission before we support them."
- People currently using the service could make their own decisions and these were respected.
- Staff ensured that people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests. For example, we saw each care plan recorded that the person had consented for their photograph being taken, the administration of their medicines and for their care plan to be shared with significant others. We observed staff obtaining consent from people before they provided any support or care. This also included knocking on people's bedroom doors before they entered.

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's needs were met through good organisation and delivery.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People's personal beliefs and cultural preferences were respected.
- One relative told us, "I find all the staff both professional and very caring. Nothing is too much trouble and they have great patience and understanding." Another relative told us "I have never had any concerns about (name) as the staff are always so respectful and kind."
- One person told us, "I think they are all fabulous, they are all my friends."
- Staff received training on equality and diversity. The registered manager assessed staff's knowledge through both one to one supervision sessions and refresher training.

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

- Relatives confirmed they were involved at all stages of care planning for their family members and, where possible, people who used the service made their own decisions about their care. We saw from a survey conducted in January 2019 that everyone at Hillside considered they had 100% involvement and control in the care and support provided.
- Documents reviewed showed evidence of both relatives and people's involvement in their initial assessments. We also saw evidence that formal reviews of people's care had been carried out within the past six months.

Respecting and promoting people's privacy, dignity and independence

- Staff received training on confidentiality and information governance.
- The registered manager securely stored all paper and electronic records.
- Review of care records showed that people's dignity and independence was promoted and maintained

Is the service responsive?

Our findings

Responsive – this means that services 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.

Personalised care.

- Staff knew people's likes, dislikes and preferences. For example; details around how a person preferred to spend their leisure and social time.
- People were able to make choices and have as much control and independence as possible, which including in developing care, support and treatment plans. We saw several examples within people's care plans where extensive support had been provided to enable people to experience opportunities outside of the home. For example, one person required waking night care staff due to their heightened levels of anxiety. The registered manager devised a system that monitored and recorded the persons behaviours associated with these anxieties and also reviewed their current regime of prescribed medicines with the health liaison nurse. The results of these observations and a change in their medicines based on the outcome of these observations greatly reduced the person's anxiety and in turn meant that they no longer required support during the night time.
- People's needs were identified, which included those related to protecting people's choices and preferences.
- An individual pictorial activities programme was available. Activities included trips provided to a local nightclub once a month, theatre and cinema trips, shopping trips to Watford shopping centre and pub trips. People had also enjoyed opportunities to go on annual holidays. One relative was very complimentary about the opportunities their family member was given to access social events within the local community as well as being supported to visit their family at home to join in celebrations and social events.

Improving care quality in response to complaints or concerns.

- Pictorial information on how people could make a complaint about the service was displayed throughout the home.
- People and relatives knew how to make complaints should they need to. They told us they believed they would be listened to and complaints acted upon in an open and transparent way by management, who would use any complaints received as an opportunity to improve the service. One relative said, "I know that if I have a problem I can always call the (registered) manager or any of the staff and feel confident that it will be resolved immediately. We have a good relationship with all the staff. "

End of life care and support

- People and their relatives were supported to make decisions about their preferences for end of life care, and staff empowered people and relatives in developing care and treatment plans. Professionals were involved as appropriate. End of life care plans were written in an easy read format and provided clear guidelines for staff to follow. We reviewed a section within one person's care plan which had been sympathetically devised and covered all aspects of from the planning, the persons wishes with regard to if

they preferred to be cremated or buried, the flowers they would like, the choice of denomination, what music they would like and who they wished to carry the coffin.

- The registered manager and staff had provided emotional and practical support to a person at the home whose partner had recently died. This had been managed sympathetically and with compassion for everyone involved. The registered manager also assisted the person in organising both the funeral and the wake afterwards.
- Staff understood people's needs, were aware of good practice and guidance in end of life care.
- The service was able to access specialist equipment and medicines at short notice to ensure people were comfortable and pain free.
- The service supported people's relatives and friends as well as staff, before and after a person passed away. There was currently no persons living in the service that required this level of support at the time of this inspection.

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 our last inspection the provider had failed to assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity this was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 17.

Planning and promoting person-centred, quality care and support; and how the provider understands and acts on duty of candour responsibility

- The registered manager and care staff were all caring and committed to ensuring they gave good quality, person-centred care.
- The registered manager and team had a good understanding of their responsibilities.
- The registered manager showed an open and honest approach to care provision.

The registered manager and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager and staff team were all able to define their roles and how to put these into practice.
- The registered manager and staff team understood the impact of good care on the people they were supporting.
- The registered manager showed a good understanding of legislation and the requirements and their responsibilities within the governance role.
- Risks were understood, safely managed and used to empower people and develop their skills and confidence.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics.

- One person told us, "I love it here, the staff are all great, every one of them."
- Staff told us, "The manager here is very approachable and open. We are like one happy family. The manager will always step in if we are short staffed and their door is always open if we have a problem or concern about someone." Another staff member said "(registered manager name) is very passionate and they have taught me so much about the job."
- People and staff gave positive feedback about the registered manager and care staff. One person told us, "They are very good and the best at everything."
- Information was in formats suited to the individual need.

Continuous learning and improving care.

- The registered manager used audits and feedback to develop and improve the service and relayed this to

the staff team.

- The registered manager used their knowledge of the wider care industry to learn when things had gone wrong and evaluate how to avoid the same concerns at Hillside. The registered manager had worked hard to improve the service since the last inspection. The environment had been extensively improved and individual risk assessments had been reviewed and updated. We found all records and documentation were well organised and effective in ensuring people at Hillside received the care and support they deserved and were also supported to live full and meaningful lives.

Working in partnership with others.

- The registered manager showed how they worked with others and external health professionals to help improve the quality of life for people. For example the local community learning disability team.
- The service provided a contact record for health professionals so that important updates could be added into a person's care plan or risk assessment.
- The registered manager told us that they had also attended local networking groups and liaised with other teams to share ideas and find innovative ways to improve the care they provided, if and when possible.