

## The Oaklea Trust

# Yealand Drive (Adult Care Home)

### Inspection report

8 Yealand Drive, Ulverston  
Cumbria, LA12 9JB  
Tel: 01229 582764  
Website: oakleatrust.co.uk

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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 

### Overall summary

We carried out this announced inspection between 7 and 13 August 2015. We last inspected this service on 18 February 2014. At that inspection we found that the provider was meeting all of the regulations that we assessed.

Yealand Drive (Adult Care Home) provides accommodation and personal care for up to five people who have a learning disability. People living in the home

have their own bedrooms which are on the ground and first floor of the property. There are suitable toilets and bathrooms, a large sitting room, dining room and kitchen which people living in the home share.

There was a registered manager employed at the home. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like

# Summary of findings

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 who used this service were safe. The staff knew how to identify if a person was at risk of abuse and the action to take to protect people from harm. Risks to people's safety had been assessed and measures put in place to manage any hazards identified.

All the staff completed training to give them the skills to meet people's needs. Checks were carried out before new staff were employed to ensure they were suitable to work in the home.

People were treated with kindness and respect. They were included in planning and agreeing to the support they received. The care staff knew the people they were

supporting and the choices they had made about their care. The staff knew how people communicated and gave people support to make and express their choices about their lives.

People followed activities of their choice in the home and local community. There were enough staff to support people to take part in the activities they chose.

The service was well managed. The registered manager set high standards and the focus of the service was on promoting people's choices and rights. The registered manager had a good understanding of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards, (DoLS), and how to protect the rights of people who needed support to make important decisions about their lives.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

There were enough staff to provide people with the support they required.

The staff knew how to identify if a person was at risk of abuse and the action to take to protect people from harm.

Medicines were managed safely and people were protected from the misuse of medicines.

Good



### Is the service effective?

The service was effective.

The staff in the home had completed training to give them the skills and knowledge to meet people's needs.

People had a choice of meals and drinks that they enjoyed.

People's rights were protected. The registered manager was knowledgeable about the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards.

Good



### Is the service caring?

The service was caring.

The staff treated people kindly and provided the support they needed.

People were given the information they needed to understand their support and to make choices about their lives.

People's privacy, dignity and independence were protected.

Good



### Is the service responsive?

The service was responsive.

People were included in decisions about their care.

A range of appropriate activities were provided that took account of people's interests, preferences and needs.

The registered provider had a procedure for receiving and managing complaints about the service.

Good



### Is the service well-led?

The service was well-led.

The atmosphere in the home was relaxed, friendly and inclusive. The service was focussed on promoting people's choices and rights.

There was a registered manager employed in the home. The registered manager set high standards and worked with the care staff to ensure these were met.

Good



## Summary of findings

The registered manager monitored the quality of the service to ensure people received safe care that met their needs.

# Yealand Drive (Adult Care Home)

## 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 between 7 and 13 August 2015. We gave the provider 24 hours' notice of our visit on 7 August 2015 because the location was a small care home for adults who are often out during the day and we needed to be sure that someone would be in when we visited. The registered manager was not available to speak with us when we visited the home on 7 August. We arranged to return to the home on 13 August to speak with the registered manager and to look at records around staff training and supervision.

The inspection was carried out by one Adult Social Care inspector. During our inspection visits we spoke with all of the people who lived in the home, four care staff and the registered manager of the service. We observed care and support in communal areas and looked at the care records for three people. We also looked at records that related to how the home was managed.

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 reviewed the information we held about the service, including the information in the PIR, before we visited the home. We also contacted the local authority for their views of the service.

# Is the service safe?

## Our findings

We asked people if they felt safe living at Yealand Drive (Adult Care Home), (Yealand Drive) and they told us that they did feel safe. One person said, "I'm safe". They told us that they liked the staff who worked in the home and said they would speak to a member of staff if they felt unsafe in the home or in the local community. They told us, "I'd speak to [staff member] if someone upset me".

Some people who lived at the home could not easily share their views with us. We saw that people were comfortable and relaxed around all the staff who were working during our visits.

All of the staff who we spoke with told us that people were safe living in this home. They told us that they would be able to identify from individuals' behaviour and body language if they felt unsafe or anxious. All the staff said they would immediately report any concerns about a person's safety or wellbeing to the registered manager or a senior person within the organisation.

All of the staff we spoke with told us that would not tolerate people being treated in any way that placed them at risk or that did not uphold their rights. They showed that they were committed to ensuring that people were safe and treated with respect.

The staff were aware of how to recognise and report abuse. They told us that they had completed training in how to protect people from abuse. One staff member told us, "We do training in safeguarding and then have regular refresher training, it's good to go over it again, just to make sure it's 'fresh' in our minds". People were protected from abuse because the staff employed in the home understood how to identify and report concerns about people's safety.

We looked at three people's care records. We saw that risks to individuals' safety had been identified and measures put in place to reduce and manage any hazards identified. We saw that the risk assessments focused on protecting people from harm while also supporting them to maintain their independence.

People were protected because plans were in place to deal with foreseeable emergencies including the actions to be taken in the event of a fire. The staff explained how they would support people to be safe if there was a fire in the home. They told us that regular fire drills were carried out to remind people of what to do if the fire alarms sounded. One person who lived in the home showed us what they would do if there was a fire and another person told us about the actions they would take. Some people required support from staff to maintain their safety if there was a fire and this was clearly identified in their personal evacuation plans.

We asked people if they felt there were enough staff in the home to provide the support they required. People who could speak with us told us that there were enough staff. During both of our visits to the home we saw that people received the support they required promptly. The staff were patient when supporting people and gave people the time they needed.

The records we looked at showed that staffing levels were planned around the needs of people who lived in the home. This was confirmed by the staff we spoke with. We saw that some people required support on a one to one basis in order to follow activities safely in the local community. We saw that the staffing levels had been arranged to ensure that this support was available.

Safe systems were used when new staff were recruited to work in the home. Checks were carried out to confirm that new staff were of good character and that they were safe and suitable to work in a care service. This helped to protect people who lived in the home.

We looked at how medicines were stored and managed. We saw that medicines were stored securely to prevent them from being misused. All the staff who handled medication had received training to ensure they could do this safely. The records of medicines that had been given to people were fully completed to show when people had received their medicines. This protected people as it helped to prevent mistakes in how medicines were administered.

# Is the service effective?

## Our findings

We asked people who lived in the home if they thought the staff who worked there were trained and able to provide the support they needed. People who could speak with us told us that the staff were “good at their jobs”. One person said, “[Named care worker] is good, [named care worker] is good and [named cared worker] is good – they’re all good”.

All the staff we spoke with told us that they had completed training to ensure they had the skills and knowledge to meet people’s needs. They said they had completed training in protecting people from abuse, safe moving and handling, emergency aid and health and safety. They also said that they had completed specialist training to support people who had complex needs. One staff member told us, “We get lots of training, there’s always training on”.

The care staff told us that they felt “very well supported” by the registered manager of the home. They said that they had regular meetings with the registered manager where they could discuss their own practice and were able to raise any concerns in a confidential manner. They told us that the registered manager gave them good guidance and worked with them providing support as they worked with people. All the staff we spoke with said they received the support they needed to carry out their roles and to provide the care people in the home required.

People who could speak with us said that they liked the meals provided in the home. We observed two meal times during our visits to the home. We saw that people who could not tell us their views enjoyed the meals provided. Throughout both of our visits we saw that people were provided with hot and cold drinks. We saw that the staff knew how individuals communicated that they wanted a drink and how they expressed their choices. One person

could not easily tell the staff which drink they wanted. We saw that the staff assisted this person by showing them the alternatives available so that they could choose which they wanted. We saw that people were given appropriate support to make choices about their meals and drinks.

People told us that they made choices about their lives in the home. When we visited the home on 7 August 2015 two people were not present, as they had gone on holiday supported by care staff. Another person told us that they had been asked if they wanted to go on the holiday. They said they had chosen not to go but to have a day trip to a location they liked instead.

The registered manager had a good understanding of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards, (DoLS), and how to protect the rights of people who needed support to make important decisions about their lives. We saw that the atmosphere in the home was inclusive and respectful. Throughout our inspection we saw that people were supported to make their own decisions and the choices they made were respected. No one who lived at the home required a DoLS as there was no one who required continuous supervision.

The care records we looked at showed that people had been supported to attend health care appointments as they needed. We saw that the staff knew how people communicated that they felt unwell or in pain. One person had an appointment to see that dentist on the day of our second visit to the home. The staff told us that the person’s behaviour had indicated that their mouth was sore, so they had arranged the appointment and were supporting the individual to attend. This showed us that the staff took action to ensure people received the support they required to maintain their health and wellbeing.

# Is the service caring?

## Our findings

People who could speak with us said that the staff employed in the home were “good” and “nice”. They told us that they knew and liked all of the staff who worked in the home.

We saw that people appeared comfortable and relaxed around all the staff who were working in the home during our visits. We saw that the staff were friendly towards the people who lived in the home. The staff gave people their time and attention and shared jokes with them. We saw that the staff understood that it was important to spend time with people. The atmosphere in the home was relaxed and people were treated kindly.

Throughout our inspection we saw that people were treated with respect and that the staff took appropriate actions to protect people’s privacy and dignity. People were discreetly asked if they needed support and any support was provided in private to maintain individuals’ dignity and privacy. We saw that people were encouraged to carry out tasks for themselves. This helped to maintain their independence.

We saw that the staff knew how people communicated their needs and how they expressed their choices. During both of our visits to the home we saw that people were

given choices in a way that they could understand. The staff in the home respected the decisions that people made. We saw that people chose where they spent their time and the activities they followed.

Each person who lived in the home had a support plan. We saw that the support plans gave information about the person’s background, the support they needed and the choices they had made about their lives. We saw that the support records were in a format to make them most relevant and accessible to the individual. People were given the information they needed to understand their support and to make choices about their lives.

Each person who lived in the home had a named staff member who was their key worker. The key workers supported people to express what was important to them and to develop and achieve their personal goals. People who could tell us their views told us that they liked their key workers. They said the key workers knew them well and knew the things that were important to them.

The registered manager had links with local advocacy services. An advocate is an independent person who is not connected with the home but who can support people to express their views. The staff in the home knew how to contact the advocacy services if an individual required support to make choices about their lives or to express their wishes about their care.



# Is the service responsive?

## Our findings

We asked people if they liked living at Yealand Drive and they told us that they did. One person said, “I like it here”. People told us that they made choices about their daily lives and this was confirmed by the interactions we observed during our visits.

We saw that people followed a range of activities of their own choice. During our inspection we saw that some people chose to follow an activity alone in their rooms and other people were supported to follow activities in the local community. We saw that activities were provided to take account of the interests, preferences and needs of each individual.

Each person who lived in the home had a support plan that held information about the support they required and how this was to be provided. The support plans had detailed information to guide the staff on how to care for people. Where people had more complex needs we saw appropriate specialist services had been included in developing their support plans. The support plans were reviewed regularly to ensure that the staff had up to date information about how to support each person.

The staff we spoke with showed that they knew each person who lived in the home and the support they needed. They had a good knowledge of individuals’ support plans and the choices people had made about

their support and lives. We saw that as staff arrived in the home to start work, they looked at people’s support notes to ensure they had up to date information about each person and knew about any changes to an individual’s support.

The care staff told us that they assisted people in developing their own support plans. They said they used different formats for the plans to try to make them accessible to the individual. All the staff said the support plans gave them the information they needed to provide people’s support.

The support plans included goals that people had set for themselves such as learning a new skill or an activity that they wanted to do. One person told us that their key worker had spent time with them planning each step they needed to take in order to achieve their chosen goal. They described how they had worked with their key worker to complete each step and said they were looking forward in taking part in the planned activity.

The registered provider had a procedure for receiving and managing complaints about the services it provided. The staff we spoke with told us that they would be confident to support people if they wanted to make a complaint about the care they received. People who could speak with us said they had not had to make a complaint about the service. One person said, “I’d tell [the registered manager] if I wasn’t happy”.

# Is the service well-led?

## Our findings

People who could speak with us told us that they thought the home was well managed. They told us that they knew the registered manager and would speak to them if they had any concerns. We saw that people appeared relaxed and comfortable around the registered manager. One person told us, “[The registered manager] is nice”.

During both of our visits to the home we saw that people were asked in an informal manner if they were happy with their support. The provider also used formal systems to gather people’s views to influence how the service was provided. We saw that people had been asked to complete a quality survey to share their views with the registered provider and registered manager. People also attended meetings to discuss how the service was provided. We saw records of these meetings and people confirmed that they were asked for their views.

The atmosphere in the home was relaxed and inclusive. We saw that the all the staff spoke to people in a kind and friendly way. We saw many positive interactions between the staff on duty and people who lived in the home.

The staff we spoke with told us that the registered manager set high standards. They said that the focus of the service was on providing the support people needed and on

promoting people’s choices and rights. All the staff said that the home was well managed and that they were well supported by the registered manager. One staff member told us, “This is the best service I’ve ever worked in”.

The staff told us that they knew their responsibility to ensure people in the home were treated with respect and protected from abuse. They told us that the registered provider had systems in place for staff to report any concerns. All the staff told us they would be confident speaking to the registered manager if they had any concerns about the behaviour of another staff member. They said they were confident that the registered manager would take appropriate action if concerns were reported to them. The staff also told us they knew who they could speak to outside of the home if they had any concerns about the service.

The registered manager of the home carried out regular checks on the safety and quality of the service. These included asking people for their views of the care they received. The registered manager ensured that people received safe care that met their needs.

Providers of health and social care are required to inform the Care Quality Commission, (the CQC), of important events that happen in the service. The registered manager of the home was aware of their responsibility to inform CQC of significant events.