

Voyage 1 Limited

The Lawns

Inspection report

52 Salterton Road
Exmouth
Devon
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Website: www.voyagecare.com

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Lawns is a residential care home providing personal care and accommodation for up to nine adults living with a learning disability. Services for people with learning disabilities and or autism are supported. At the time of the inspection there were eight people living at The Lawns.

People's experience of using this service and what we found

People and their families were positive about The Lawns and staff who supported them.

People were treated with kindness and compassion. People spent time in the community within COVID-19 guidelines and at the home, doing activities they enjoyed and had chosen. People's support focused on them having as many opportunities as possible for them to gain new skills and maintain independence. Risks to people had been assessed and care plans reflected how to support people to keep people safe whilst maximising their independence.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Where there were restrictions on people, staff were working within the requirements of the Mental Capacity Act (2005).

There were enough staff to support people. Staff had been recruited safely and completed an induction when they first started. Staff updated training to ensure they were able to support people, following best practice guidance and seeking health professional support for particular medical conditions. For example, epilepsy and VNS systems (a magnet used to manage seizures).

Staff worked in a relaxed manner, ensuring that people had enough time to make decisions for themselves wherever possible in a way they understood.

People were kept safe by a registered manager and staff who were committed to their care and well-being.

Safeguarding issues were reported and investigated appropriately. Lessons were learnt when things went wrong, and actions were taken to reduce the risks of a reoccurrence. Staff had received up to date safeguarding training and knew how to make appropriate referrals.

The home was well-maintained and looked after. The home was clean and we were assured that staff were following COVID-19 national guidelines. There were policies and procedures to ensure the risks of infection was minimised with particular focus on COVID-19.

Medicines were well managed and organised.

We expect health and social care providers to guarantee autistic people and people with a learning disability

the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

- Model of care and setting maximises people's choice, control and independence.

Right care:

- Care is person-centred and promotes people's dignity, privacy and human rights.

Right culture:

- Ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to nine people. At the time of this inspection eight people were using the service. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size.

There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

Rating at last inspection The last rating for this service was Good (published 7 March 2018)

Why we inspected

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

The inspection was prompted in part due to concerns received about the care of people with epilepsy. Concerns had also been raised about the registered manager. A decision was made to inspect and examine those risks. We have found evidence that the provider has made improvements to mitigate any risks. Please see the safe and well led sections of this report. We found no evidence during this inspection that people were at risk of harm from this concern. There was a whole home safeguarding process which is now closed and an individual safeguarding process which is ongoing. The provider has been fully co-operative with this process.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Lawns on our website at www.cqc.org.uk.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

The Lawns

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector.

Service and service type

The Lawns is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We looked at information we had about the service including a

complaint which had been investigated by the service and safeguarding information. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service with some limited communication. We received comments from six relatives about their experience of the care provided and interactions with the service. We spoke with two members of care staff on the day of the inspection, the operations manager and registered manager. We did a tour of the premises and observed care in the communal spaces.

We reviewed a range of records. This included two people's care records, four support plans, all epilepsy management documents and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, COVID-19 management and policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We also heard from another staff member. We looked at training data and quality assurance records. We also attended a safeguarding meeting.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- All areas of the home were safe for people to spend time in on their own or with staff. There was a large secure garden with a new ramp leading to a lawn and seating area.
- An empowering culture encouraged positive risk taking. People were supported to live their lives as they chose. For example, there were detailed risk assessments which described how to support people to reduce the risk while supporting them to be as independent as possible. People, and their families, were involved in making decisions about the ways these risks were managed. For example, people were able to spend their day as they wished whilst alternative activities were also suggested and preferences respected.
- Where people had behaviours that could challenge others, there were clear guidelines which staff were able to describe to help manage the behaviour. People were respected as adults and involved in discussions and devising enabling plans about how they would feel comfortable but also promoting safety. For example, ensuring that health conditions were fully investigated and treated and body language noted. For one person this had resulted in a reduced number of behaviours which could be challenging for others. Another person liked to sit in a particular place. This had been designed to enable them to have items they liked with them in that area.
- One relative wrote to the service saying, "All I can say is that every time I have seen [person's name], he has been clean and has appeared well cared for, has been happy and was excited to return to the home if I had taken him out and that the staff have worked hard to keep him and all the other residents safe during the pandemic."
- People were also supported to understand dangers. For example, Personal Emergency Evacuation Plans (PEEPS) were in place and were being updated to ensure they detailed any differences between day and night plans.
- People's body language indicated they felt safe in the home and comfortable with staff and the registered manager. Staff showed they knew people very well and understood how they communicated. Relatives said they were confident that people were protected from the risk of harm. A relative commented, "I would like to say how very pleased I am with the care my daughter receives at The Lawns. The management is efficient but friendly and supportive of both myself and [person's name]. Although I have not been able to visit, I have had regular phone contact with the staff who are always very aware of how [person's name] is and inform me of how they are meeting her needs. They have done an excellent job of keeping her safe during the pandemic." Another relative said, "[Person's name] is well looked after and has been kept safe throughout the pandemic and for this we are grateful."
- People were protected from the risks of abuse as staff had been trained to understand how to identify and deal with, types of abuse. There were clear notices in staff areas showing how to contact the local

safeguarding team. Where issues and messages were left in the staff communications book, a new system had been put in place to ensure these were noted and marked as seen and completed. Staff said, "The registered manager is thorough in making sure staff are well trained and knowledgeable in regards to safeguarding. This will also be covered in the diploma all staff are offered once through their probation."

- The registered manager understood their responsibilities to safeguard vulnerable adults. Records showed where there had been a concern, appropriate action had been taken. This included reporting the issue, investigating it and acting to reduce the risks of a reoccurrence. Staff understood people very well meaning there were few negative incidents. Safeguarding referrals had reduced due to positive management of behaviours which could challenge and the premises was large, enabling people to find their own space. The operations manager said, "There is a mantra of to always report throughout Voyage. There are always things to learn."

Staffing and recruitment

- The registered manager ensured there were enough staff to meet people's needs both when they were at The Lawns and when they were in the community. There were five staff on duty in the day and two waking staff at night. There was a stable staff team and people and relatives told us they knew staff well. For example, one relative said, "Please be assured this is a very good home . Although [person's name] isn't able to tell me, I know she feels settled and well cared for at The Lawns."
- Recruitment of staff followed best practice guidance. Checks to ensure new staff were suitable to work with vulnerable adults were completed before staff commenced working at The Lawns.
- People living at The Lawns were supported by staff who were trained and skilled at supporting people living with a learning disability and/or autism.

Using medicines safely

- Medicines were managed safely. There were effective systems to ensure medicines were ordered, stored, administered and monitored safely, including pro-active medicine reviews with GPs. Support staff were trained in the administration of medicines.
- There was a person-centred approach to medicine administration. People received their correct medicines on time. Staff took time to ensure the person was happy to take their medicine and did not rush them. People were provided with a drink when taking medicines.
- There was information about medicines that were given as needed (PRN) in care plans. This could be more detailed within the medicine administration sheets themselves and was being addressed (MARS).

Learning lessons when things go wrong

- There were systems in place to ensure all accidents and incidents were recorded, investigated and action taken. Staff were supported to learn from incidents and accidents. For example, learning was discussed at staff meetings.
- The registered manager reviewed all accidents and incidents and analysed for trends and patterns and shared these formally with the provider. Where concerns were identified, the provider looked for ways to further improve the service. For example, all epilepsy risk assessments had been fully re-assessed and were very detailed about how epilepsy for individuals presented, treatment and recovery management. New handover monitoring systems ensured the three epilepsy listening devices in use were checked before and after each shift by two staff to ensure they were working. During the recent safeguarding meeting, health professionals commented, "The provider [and service], has demonstrated a huge effort to take learning and make improvements where needed."

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.

- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service was led by a committed and motivated provider and registered manager who were clearly very knowledgeable about people and enjoyed their company. They had the knowledge, skills and experience needed to run the service. They understood their role to lead a team of support staff as well as ensure the quality of care and safety of people. There was a clear staff structure and staff understood and were committed to delivering good quality care for people. For example, some staff had visited the home on Christmas Day to take a person out so they did not miss out. Staff felt they could speak to the registered manager at any time and only had positive comments.
- There was a person-centred culture which put people at the heart of the service. For example, the registered manager wanted people's needs to be met wherever they were. There were clear care needs summaries and hospital passports to share information with hospital staff.
- People and their families were encouraged to get involved in how the service was run. Staff also described how they were encouraged to make suggestions and put forward ideas. One family had said they would like more consistent communication and this was being addressed by better record keeping of family contact and sharing of photos.
- The registered manager had an open-door policy and encouraged staff and people to come and talk to them whenever they wanted to. The concerns about the registered manager had been fully investigated by the provider and had not been substantiated.

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

- People were clearly pleased to see the registered manager and staff. Their ethos was about offering support to suit individuals to encourage, empower and enable people to be as independent as possible.
- The provider understood and acted on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong. For example, where an incident had occurred, there was evidence that this had been reported to the appropriate authorities including CQC. The registered manager and staff worked with these authorities to reduce the risks of a reoccurrence. Families were also kept informed and staff had been supported.
- Staff understood their role and responsibilities. There were handovers using a handover template between support staff at the end of each shift to ensure staff coming on duty were aware of issues and

concerns. Staff updated training to ensure they were able to support people, following best practice guidance and seeking health professional support for particular medical conditions. For example, epilepsy and VNS systems (a magnet used to manage seizures).

- Staff found the registered manager to be supportive saying, "I find as the registered manager he is responsive and leads the team well. Over the passed year we have all worked well to keep the people we support safe from COVID-19 and he has made sure all information is cascaded through regular meetings.
- There was an audit framework which reported on safety and quality. Audits were carried out to check on the buildings, external areas, care records and medicines. This helped to improve the quality and consistency of care and safety. Quality assurance was overseen by a robust provider quality team who visited annually. Regular audits were sent to head office and the operations manager completed quarterly audits. Actions from audits had included installation of fixed overhead hoist, new key pads and mattresses. The service had identified that daily records including those relating to goals, records of family contact and activities could be improved to enable easier auditing. The registered manager had booked professional record keeping training for staff and was addressing the issue including monitoring staff communications.

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

- People, their families and staff were engaged in feedback systems to support improvement for individual people's experience as well as the service. Systems for feedback included individual care reviews, house meetings, surveys, staff meetings and staff supervision. Staff supervision was not as regular and detailed as required but staff felt they could speak to the manager at any time. The registered manager was ensuring this was addressed.
- There were usually good links with the local community. However, the COVID-19 pandemic had placed limitations on visiting and activities. The registered manager and staff had worked creatively to ensure people were meaningfully occupied. For example, there had been many themed fun days during the pandemic to reflect people's interests such as a 'Where's Wally Day', garden parties, tropical day, heavy metal day with staff dressing up, a 'Disney Day' and a 'Star Wars Day'. A large sensory room with a film projector ensured people were comfortable and felt safe whilst relaxing. One keyworker was looking at how the use of virtual technology would benefit people. In person visiting had now recommenced with safe procedures in place.
- The service worked with health professionals to ensure people's health and wellbeing was monitored. One person had had a lot of professional input with the staff monitoring effectiveness of their treatment so they were now feeling much better, showing positive behaviours.