

# Autism Initiatives (UK)

## Redpoll Lane

### Inspection report

29, Redpoll Lane  
Oakwood  
Warrington  
WA3 6NP  
Tel: 01925 837004

Date of inspection visit: 09 January 2015, 12 February 2015  
Date of publication: 21/05/2015

#### 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

This inspection took place on 9 January 2015 and was an unannounced inspection. A further visit took place at the service on 12 February 2015 to access staff records.

29 Redpoll Lane is a semi-detached house located in a residential area of Warrington. It is registered to provide personal care for two adults who have an autistic spectrum disorder and a learning disability. People living at the home are supported by staff on a twenty four hour

basis. Each person has their own bedroom upstairs and share a kitchen, bathroom and lounge on the ground floor. There are gardens at the front and back of the house and parking outside.

There was a registered manager in place at the home. 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 a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

# Summary of findings

There were two people living at the home on the day of our visit. People using the service had complex needs and we were unable to gain any comments with regard to their care and support due to their anxiety around unknown people and their level of disability. We spoke with a relative, a learning disability nurse who visits the service regularly, a Best Interest Assessor from Wigan social services and received a record of a monitoring visit from St Helens council. All action raised in the visit by St Helens council had been actioned by the home.

From our observations, and from speaking with relatives and professionals who visit the service and staff we found staff knew people well and were aware of people's preferences and care and support needs. Staff communicated and engaged with people, using ways which were best for their individual needs. People were supported with their healthcare needs and medical appointments.

We found the home was meeting the requirements of the Deprivation of Liberty Safeguards (DoLS) and staff followed the Mental Capacity Act 2005 for people who lacked capacity to make decisions for themselves.

The staff we spoke with were aware of people's risks and needs and how they should be supported. The staff we spoke with considered that they were effectively trained and supported to carry out their roles. However, not all staff had received training in the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards.

People's medicines were securely stored and safely managed. The provider had a policy to guide staff regarding the safe management of medicines. Staff were aware of the actions to take in the event of an error when giving medicines.

The registered provider had robust recruitment checks in place so that people were protected from being supported by unsuitable or unsafe staff.

The home was meeting people's nutritional needs and people were supported to ensure they had enough to eat and drink.

Staff involved people in choices about their daily living and treated them with compassion, kindness, and respect. People were supported by staff to maintain their privacy, dignity and independence.

We looked at the duty rotas and spoke to staff about the numbers of staff on duty. We found there were adequate numbers and skill mix of staff on duty to meet the needs of people living at Redpoll Lane

Staff training had taken place and all staff were up to date with mandatory training so that people could be confident they were properly cared for.

We saw that the leadership and management of the home was good and there were systems in place to check that the quality of the service was effectively monitored.

# 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.

Arrangements were in place to keep people safe and secure at the service. We had no concerns about the way they were treated or cared for.

There were enough staff available to provide safe care and support. Risk assessments were in place which included information about how to manage and reduce risks that people faced.

Staff were trained to recognise any abuse and knew how to report it.

Staff recruitment included all the relevant character checks.

We found there were safe processes in place to support people with their medication

Good



### Is the service effective?

The service was effective.

Staff received appropriate, up-to-date training and support.

Professionals told us they felt the staff had the skills they needed and knew people they were caring for well.

People's health and wellbeing was monitored and they were supported to access healthcare services when necessary.

We saw people's dietary needs were managed with reference to individual preferences and choice.

The home had policies in place that ensured they met the requirements of the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS).

Good



### Is the service caring?

The service was caring.

We saw that staff interacted well with the people who used the service.

Relatives made positive comments about the caring attitude and approaches of staff working at the home.

People had care plans which described their attributes, needs and choices and how their support should be provided.

Staff were knowledgeable about people's individual needs, backgrounds and personalities.

People's privacy, dignity and confidentiality was respected. People had free movement around the service.

Good



### Is the service responsive?

The service was responsive.

Processes were in place to find out about people's individual needs, abilities and preferences.

Good



# Summary of findings

Care plans contained sufficient information about people's health care needs, and what they enjoyed doing.

Staff we spoke with knew the needs of people they were supporting.

We saw there were activities and events which people took part in that matched their interests.

## Is the service well-led?

The service was well-led.

The management and leadership arrangements promoted the smooth running of the service.

The service had procedures in place to monitor and improve the quality of the service and actions were taken to address any issues that were found.

**Good**



# Redpoll Lane

## 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 checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 9 January 2015 and was unannounced. A second visit was made to enable staff files to be seen. Both visits were undertaken by one adult social care inspector. We reviewed the information we held about the home. Providers are required to notify the Care Quality Commission about events and incidents that occur including unexpected deaths and injuries to people

receiving care, this also includes any safeguarding matters. We refer to these as notifications. We also received information from a local authority who had purchased services from the provider. We used this information to plan what areas we were going to focus on during our inspection.

During our inspection we observed how staff supported people throughout the day. We spoke with two care staff on duty and three care staff by telephone, the link manager and the registered manager. We also spoke with three health care professionals who had visited the home. A report from the social service monitoring team at St Helens was sent to us. We looked in detail at the care records of two people, we looked at the medicine management processes and at records maintained by the home about staffing, training and monitoring the quality of the service.

# Is the service safe?

## Our findings

People using the service had complex needs and we were unable to gain any comments with regard to their care and support due to their anxiety around unknown people and their level of disability. We spent time with people who used the service and support workers and we observed some aspects of daily life in the home. We did not observe anything to give us cause for concern about people's safety and well-being. We noted staff were sensitive and considerate of people's needs and choices.

Staff had received training with regard to protecting people from abuse and the safeguarding procedures were accessible to staff. We discussed the safeguarding procedures with four members of staff and the registered manager. All staff spoken with had an understanding of the types of abuse that people were at risk of and were clear about what action they would take if they witnessed or suspected any abusive practice. Staff were familiar with the term 'whistle blowing' and each said that they would report any concerns regarding poor practice. Whistleblowing takes place if a member of staff thinks there is something wrong at work but does not believe that the right action is being taken to put it right.

We saw that risks to people's health and welfare had been assessed and management plans had been drawn up for any area of risk identified. For example, people's safety outside the home and in the car had been carefully considered. People were unable to access the community on their own and it was clear when one to one or one to two support was being given to ensure people were kept safe during community activities. We saw that the duty rotas recorded the names of the staff that were on one to one or two to one support and how many hours each day

were allocated for this. Staff had time to sit and chat with people. None of the staff we spoke with expressed concerns regarding the number of staff available to support people.

We found by looking at staff files that a robust recruitment process was in place at Redpoll Lane. This included obtaining character references, confirming identification and checking people with the Disclosure and Barring Service (DBS). This helped to make sure only suitable people, with the right experience and knowledge, were employed to provide care and support to people who lived at the home.

People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines. Medicines were stored safely, and records were kept which showed that medicines were kept at the correct temperatures to remain fit for use. We looked at the medication records for people and these indicated people received their medication as prescribed. On looking at training records we saw that all staff had been trained to administer medications and this training had been updated.

We saw in each person's care records a 'personal evacuation plan' which provided staff with guidance on the support people required in the event of a fire. In these ways the provider could demonstrate how they responded to emergencies keeping people safe from harm.

The registered manager reviewed any incidents and accidents. We were told by the registered manager they would complete an investigation of every accident and incident and the outcome of this would be recorded.

We saw that the home was clean and tidy on the day of our visit.

# Is the service effective?

## Our findings

People using the service had complex needs and we were unable to gain any comments with regard to their care and support due to their anxiety around unknown people and their level of disability. During the inspection we observed staff involving people in routine decisions and consulting with them on their individual needs and choices. For example, one person had a bath and wished to stay in their pyjamas to relax in their bedroom.

We looked at the way the service provided people with support with their healthcare needs. A health action plan was present in the support files. We saw people had regular access to dentists, chiropodists and other primary health care professionals. Records were kept of all healthcare appointments and outcomes. One person had been receiving treatment by the district nurse for some time. We spoke to the nurse who said that she felt the staff were very supportive and always maintained the person's privacy and dignity. She had no concerns with the home and thought that the people who lived there were well looked after.

The registered manager and staff told us that staff asked people about their choices of food on a daily basis and that they received the meals that they had chosen. We observed staff ask people what they wanted for their lunch that day and their choices were respected. We saw the freezer, fridge and food cupboards were well stocked with a variety of foods. Staff told us that the people who lived in the home enjoyed their meals, including the take-aways and trips out to local cafes pubs and restaurants.

The Care Quality Commission (CQC) monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. The Deprivation of Liberty Safeguards (DoLS) are part of the Mental Capacity Act 2005. They aim to make sure that people in care homes, hospitals and supported living are looked after in a way that does not inappropriately restrict their freedom. The registered manager demonstrated a detailed understanding of the recent Supreme Court judgment about people who lived in care homes or supported living arrangements who received 24 hour support and did not go out unsupervised.

At the time of this inspection we were informed by the registered manager that DoLS applications had been made and that they were waiting for the outcome of this from the local authority. We saw evidence of this in the support plans and we spoke with the Best Interest Assessor from Wigan social services and they confirmed that they had visited the home. They said that the home had a relaxed atmosphere and that the person they visited appeared relaxed and happy. They had assessed all the paperwork and this had been fully completed. They said that the staff appeared to have good relationships with the person they visited and the staff team were very aware of the best way to support the person and manage their behaviour when it challenged the care and support that was needed to keep them safe.

The registered manager and two staff members spoken with had received training and were knowledgeable about the Act and how it affected people living in the home. Dates were given for when the rest of the staff at Redpoll Lane were to attend this training.

We saw that the lounge and dining room had recently been redecorated and it was recorded in the support plans as to how the staff had supported the people who live there to choose the colour schemes for the lounge and dining room. For example, one person liked footballs and the lounge had been painted in the colour of their favourite football.

We looked at training records and spoke to staff who confirmed that they had received all up to date mandatory training and confirmed there was an on-going training and development programme at the service.

Two staff members told us that they had been receiving regular one to one supervision and on-going support from the management team. This provides staff with the opportunity to discuss their responsibilities and the care of people who used the service. We saw records of two staff supervisions however not all staff had been receiving supervisions as the registered manager had been on sick leave. We spoke with five staff members and all but one said they felt supported by the management team.

# Is the service caring?

## Our findings

People using the service had complex needs and we were unable to gain any comments with regard to their care and support due to their anxiety around unknown people and their level of disability. A relative spoken with said “The staff do a good job and are good with my relative, the staff have known them a long time.”

During our inspection we observed how staff supported people. We heard staff address people respectfully and explain to people the support they were providing. Staff were friendly and very polite and understood the support and communication needs of people in their care. We heard staff knock on people’s doors and bathroom doors before entering.

On the day of the inspection there was a calm and relaxed atmosphere in the home. Throughout the day we saw staff interacting with people in a very caring and professional way. We heard a staff member in the bathroom assisting someone to have a bath. The staff member was gentle and was heard to encourage the person to wash themselves giving praise and encouragement.

We saw that people were respected by staff and treated with kindness. We observed staff treating people affectionately and it was clear that they had good relationships with the people they were supporting. Staff spoken with were able to tell us about people’s life histories, their interests and their preferences and we saw that these details were recorded in people’s care plans.

People were encouraged to build and retain their independent living skills and care plans set out how people should be supported with this. We observed staff following these. For example, we saw how goal setting was used to support people to develop independent living skills like keeping their bedroom tidy and putting dirty clothes in the washing basket.

We saw that the people who lived at Redpoll Lane had free movement around the house and could choose to sit where they liked. We observed people in the lounge and dining area and going back to their own rooms as they wished if they needed to be on their own.

We looked at two people’s care records. The care plans were centred on the person as an individual. We saw that people’s choices and preferences were written down so that a consistent approach to care was always provided by staff. For example, we saw that on one person’s plan of care in relation to behaviour that challenges support, that the day to day things which upset the person were recorded fully. This meant that staff were aware of what triggered the negative behaviour so that they could then minimise the stress and manage the care and support of this person.

We spoke with an Advanced Nurse Practitioner in learning disability who visited the home regularly and assisted the staff in how best to support people with behaviour that challenges care and self-injurious behaviour. They told us that the home was one of the best care providers they visited and were always open and transparent. They told us that the staff were brilliant and changed shifts and worked extra hours if the people who lived there wanted to do something different.



# Is the service responsive?

## Our findings

People using the service had complex needs and we were unable to gain any comments with regard to their care and support due to their anxiety around unknown people and their level of disability. We observed people being supported in various ways as was reflected in their care plans, risk assessments, decisions and choices. Each person had a personalised and varied programme of activities. People were supported to engage in activities within the local community and were encouraged to pursue their hobbies and interests. People visited local cafés pubs and went to the local shopping centre and swimming pool.

Relatives spoken with confirmed that they were kept up to date with any events or incidents that happened. To support people in negotiating their way around the premises, photographs of the communal rooms had been placed on the doors. Drawers and cupboards in the kitchen also had been labelled with photographs to describe the

contents. Staff photographs were displayed in the hallway so that people would know who was on duty on each shift. When visitors came to the home staff always told people who they were and why they were there to minimise any anxieties.

We looked at how complaints were managed. We found that there was a complaints procedure in the service user guide. There had not been any complaints at the service within the last 12 months. However, we found processes were in place to record, investigate and respond to complaints. A relative told us they knew how to complain and could discuss any issues with the registered manager or any of the staff team and it would be dealt with.

Within the health action plan there were details of GP's, dentist and hospital appointments and it was recorded how best to support the person when they attended any appointments. For example letting the person know when the appointment was and who with and how to reassure them if they became anxious.

# Is the service well-led?

## Our findings

People using the service had complex needs and we were unable to gain any comments with regard to the management of Redpoll Lane due to their anxiety around unknown people and their level of disability. We spoke with four staff members who told us the service was well organised and managed. They described the managers as supportive and approachable. Staff, had opportunity to develop the service by participating in regular meetings.

The home has had a number of managers over the last few years and staff said they were glad they now had a registered manager in post.

Handover sheets were completed following each shift and a number of these were looked at. All had been fully completed with information regarding what had happened during the shift. We looked at a sample of accident reports and saw that actions and outcomes were recorded.

The registered manager had a number of quality assurance systems in place such as monthly peer to peer monitoring; quarterly finance audit; monthly audit of restrictive practice and a monthly self-assessment. We saw audits that had

been completed by the link manager for the service. If issues were identified an action plan would be produced and actions were monitored monthly. We saw care plans and risk assessments were reviewed and amended to reflect people's changing care needs. This meant that learning from incidents and investigations took place and appropriate changes were implemented.

Records we looked at showed that the CQC had not received any required notifications. On looking at records within the home there had not been any incidents that require the home to notify us. A notification is information about important events which the service is required to send us by law in a timely way. This is to ensure that CQC were aware of any incidents that had taken place and what action the home had taken to address them.

Periodic monitoring of the standard of care provided to people funded via the local authority was also undertaken by St Helens council contract monitoring team. This was an external monitoring process to ensure the service meets its contractual obligations to the council. The report for the last visit showed that they were satisfied with the home's performance in this area and that the provider was receptive to their recommendations.