

# Advance Housing and Support Ltd

## 8 Brantwood Road

### 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: 8 Brantwood Road provides accommodation and support for five people with mental health needs. On the day of our visit, there were five people living in the service.

People's experience of using this service:

People were supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. People were free to leave the home when they wanted, there were no restrictions in place.

People told us they were safe and liked living at the home. People living in 8 Brantwood Road needed minimal support with their personal care needs. Staff mainly encouraged people to complete tasks independently.

People told us staff talked to them about how to stay safe in the home and in the community. They told us if they had any concerns they would talk with staff. Staff were knowledgeable about safeguarding and how to report their concerns internally and externally to local safeguarding authorities.

People told us they knew what risks were involved when they were in the home, doing activities or accessing the community. Risk assessments were in place to identify possible risks to people's health and well-being and measures were implemented to manage the risks.

There were enough staff to meet people's needs. The registered manager told us people needed no support during the night and they had an emergency contact number in case there was an emergency. However, there were no individual assessments for people to establish if they knew how to ask for help. We recommended to the provider to carry out risk assessments to establish the level of risk during the night to each person when staff were not in the building.

Care plans were well developed and personalised to give guidance to staff on how to support people effectively. People were encouraged to eat a health balanced diet. They had regular health checks and staff supported them to attend their regular health appointments.

People told us staff were kind and caring and helped them. People's personal information was kept confidential.

People were involved in discussions about their care and had monthly meetings with their allocated staff member (key worker) to review their mental health.

Staff received training in subjects considered mandatory by the provider and had further opportunities to develop their skills and knowledge. People were also encouraged to develop their knowledge by attending different learning courses like fire awareness and about how to keep good oral health.

The provider had a five-year customer engagement strategy. This is where they rolled out various engagement programs for people, gather feedback and seek the views of people in terms of shaping the service to meet their needs.

People`s dignity and privacy was promoted and respected by staff. Staff enabled people to maintain and develop relationships and stay safe.

People were encouraged to engage in activities, pursue hobbies and interests and socialise. Opportunities were created by the provider for people from all their services to get together regularly and participate in workshops they were interested in.

The provider`s governance systems and processes were effective and identified areas of the service where improvements were needed. The registered manager and the provider completed regular audits to ensure the service provided to people was effective and safe.

Rating at last inspection: Good (report published 07 June 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remained rated Good overall.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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.

# 8 Brantwood Road

## Detailed findings

### Background to this inspection

The 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.

Inspection team: The inspection was carried out by one inspector.

Service and service type: 8 Brantwood Road 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.

What we did: Before the inspection we reviewed information, we held about the service including statutory notifications. Statutory notifications include information about important events which the provider is required to send us. We reviewed the provider information return (PIR) submitted to us. This is information that the provider is required to send to us, which gives us some key information about the service and tells us what the service does well and any improvements they plan to make.

During the inspection we spoke with one person and observed how staff supported two other people in the home. We spoke with a relative of a person living in the home, a staff member and the registered manager.

We looked at two care plans and reviewed records relating to the management of the service.

# Is the service safe?

## Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

### Systems and processes

- Staff received training in safeguarding procedures and were confident in describing signs and symptoms they would monitor to establish if people were at risk of harm. Staff told us they knew how to report their concerns internally and externally to local safeguarding authorities.
- Relatives told us they felt safe the service was safe. One relative said, "[Person] is safe. Staff are good and we trust them."
- People were encouraged to attend a conference organised by the provider yearly where they could participate in safeguarding workshops to know how to keep safe from abuse.

### Assessing risk, safety monitoring and management

- Risks to people's mental health and well-being were assessed and reviewed regularly to take account of people's changing needs and circumstances. Risk assessments were in place for people accessing community, helping staff in the kitchen, mobility and falls risks.
- People were supported by staff to understand risks and work with staff to live life to the full, while effectively managing risks. For example, people could leave the house when they wanted. However, a missing person's procedure was in place to ensure if people did not return at the agreed time actions were taken by staff to help ensure the persons safety.
- People had no support from staff during the night. However individual risk assessments were not in place to assess if each person knew how to ask for support during the night. The registered manager told us they will discuss this with the provider and carry out the necessary assessments to ensure people were safe.
- Regular fire drills were completed and people told us they had to leave the house when they heard the fire alarm and wait for staff to help them outside. A fire risk assessment had been carried out recently and actions resulting from this were in the process of being implemented.

### Staffing and recruitment

- There were enough staff to meet people's needs.
- Recruitment processes were robust and ensured that staff employed were suitable to work in this type of service.

### Using medicines safely

- Staff administering medicines were trained and had their competencies checked. We found that the medicines we checked corresponded with the records kept.

### Preventing and controlling infection

- People were protected against infections.

- Staff were trained in infection prevention and control and had access to personal protective equipment like disposable gloves and aprons.

#### Learning lessons when things go wrong

- There were regular staff meetings and meetings with people using the service. Any incidents in the home were discussed and the registered manager ensured lessons were learned.

# 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.

Good: People's outcomes were consistently good, and people's feedback confirmed this.

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

- People lived at the service for many years and their support needs were well known to the registered manager and staff. Care plans were developed and regularly reviewed to ensure they accurately reflected people's needs.
- People discussed their mental health needs monthly with staff, reflecting on the past month and planning the activities they wanted to do in the coming weeks.
- Staff followed best practice when they involved people in decisions about their care by presenting information to people in a format they could easily understand and communicate their decisions.

Staff skills, knowledge and experience

- Staff told us and records confirmed that they received appropriate training and support to carry out their roles effectively.
- New staff members were required to complete an induction programme during which they received training relevant to their role and achieved a nationally recognised 'Care Certificate.' They worked alongside other experienced colleagues until they were competent in their duties.
- Staff received regular supervision and support to carry out their roles effectively.

Supporting people to eat and drink enough with choice in a balanced diet

- People were encouraged to have a healthy balanced diet. People were involved in decisions about the menu and encouraged to take part in cooking meals. One person said, "I know about healthy eating."

Staff working with other agencies to provide consistent, effective, timely care

- Staff working at the home were able to promptly identify when people's needs changed and seek professional advice.
- Staff worked in partnership with health and social care organisations. They were appropriately sharing information about people to ensure that the care and support provided was effective and in people's best interest.

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

- The home was clean and welcoming.
- People were involved in tasks around the home, setting tables, washing dishes and preparing their own food.

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



- People had access to health professionals to help them live a healthier life. People had an annual health check which included appointments to the optician, dentist and GP.
- People where needed were referred dieticians to help them keep a healthy weight.

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 that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.
- People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).
- We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- Care plans evidenced that people had the mental capacity to decide about their care or treatment and they had no restrictions applied to their freedom.

# 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

Good: 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 told us staff were kind and caring. One person said, "I like the staff. They are nice."
- Staff, and the registered manager, showed us that they knew people's needs and preferences well.
- Staff were aware of people's likes and dislikes and ensured their preferences for support were respected. We saw staff adapting their communication to each person's preference. Where some people preferred staff to smile and be cheerful when addressing them, others wanted staff to be serious when talking to them. We saw staff knew how to approach each person to motivate interaction.
- Staff could tell us about individuals and the contents of their care plan, and we saw that the information they provided us with was reflected in people's care plans.
- Relatives told us staff helped people maintain relationships important to them.

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

- Staff told us they supported people to make decisions about their care.
- People told us they discussed their needs, wishes and preferences with staff and these were respected.

Respecting and promoting people's privacy, dignity and independence

- People told us that people's privacy and dignity was respected. One person said, "I can go to my room if I want to be alone."
- People looked well-groomed, dressed in clean clothes appropriate to the weather.
- People were encouraged to be independent. We saw a person preparing their own lunch and washing the dishes after they ate. A person told us, "I am independent. I go out to the shops."
- Records were stored securely and staff understood the importance of respecting confidential information. They only disclosed it to people such as health and social care professionals on a need to know basis.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that services met people's needs

Good: People's needs were met through good organisation and delivery.

### Personalised care

- People received personalised care and support which enabled them to live life to the full.
- People were supported to develop their activity schedule depending on their interest. One person told us, "I like football. I went to see a football match. I am going to the pub as well."
- People's care plans were developed with personalised information about how people communicated and what their likes, dislikes and preferences were in terms of their routines, hobbies and favourite meals.
- People were encouraged to maintain relationships with friends and family. A person told us staff helped them to find their family member and visit them. They were planning more visits and were happy about this.
- People told us staff were responsive and flexible towards them and they could ask staff to help them with anything they wanted. One person said, "Staff will help me if I need help. I can ask them and they are good and will help."

### Improving care quality in response to complaints or concerns

- People told us they would talk to staff if they had any complaints. Relatives told us they had no complaints, and were confident that the registered manager would respond and solve any issues they may have had.
- The provider's complaints procedure was appropriately shared with people and relatives to ensure they knew how to raise their concerns.

### End of life care and support

- The service had not provided end of life care at the time of the 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

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

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

- People and relatives told us they were happy how the registered manager run the home. One person told us, "The manager is good."
- Staff told us the registered manager was approachable and helped them when they needed. Staff felt listened and told us the registered managers door was always open if they needed support.
- The registered manager was knowledgeable about the people living in the home. They were passionate about providing people with personalised care and support.
- The provider`s systems and processes were developed to support the registered manager to monitor and improve the quality of the care and support people received. Regular audits were carried out by the registered manager and the provider where they regularly looked at all aspects of the service. There were regular health and safety audits, care plan audits, surveys and meetings organised for people as well as staff. Where issues were identified, action plans were in place and completion of actions were checked in the next month audits.

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

- Staff told us they felt valued and listened to by their managers. We saw that staff had one to one support appropriate for their job roles.
- Staff were well trained and were aware of their roles and responsibilities. Staff told us the registered manager was always available to provide hands on support if it was needed.

Engaging and involving people using the service, the public and staff

- People where possible and staff actively participated in the running of the home by sharing ideas at meetings which were listened to by the registered manager and where needed actions were put in place to ensure the service was tailored to people`s needs.
- People could share their views about the service in monthly meetings and in surveys sent out by the provider.

Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people`s care.