

Voyage 1 Limited

# Voyage 1 Limited - 694 Pinner 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

We conducted an unannounced inspection of Voyage 1 Limited - 694 Pinner Road on 3 August 2017. The service provides care and support for up to eight people with learning disabilities. There were seven people using the service when we visited.

At the last inspection on 17 April 2015, the service was rated Good.

At this inspection we found the service remained Good.

Staff spoken with demonstrated good understanding of how they would recognise abuse and how to report allegations of abuse. Robust risk management plans ensured a consistent approach by all staff involved in people's care.

Staff followed and understood people's needs around the management of medicines. People were encouraged to gain greater independence around the administration of their medicines.

The provider followed safer recruitment practices which ensured staff were appropriately vetted. Sufficient staff were deployed to ensure people's needs were met.

Staff had access to wide range of mandatory and role specific training to ensure they understood people's care and support needs. Staff received support in form of regular appraisals and supervisions to ensure they understood people's needs and were able to carry out their duties.

People 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 practice. People took part in the planning and preparation of their meals.

Staff showed interest in people's lives and spoke kindly about people and how they cared for them. Staff provided us with various practice examples of how they ensured people's dignity and privacy was maintained.

Care records were person centred and were formulated with people's choices and interests in mind. People or significant others were involved in the care planning processes. People had access to a wide range of in-house and community based activities and were encouraged to try out new activities to widen their interests.

People were clear how to raise concerns. The service had received one complaint since our last inspection and we saw that this complaint had been dealt with appropriately by the registered manager.

The management at Pinner Road was visible and involved in 'hands on' care. Staff told us that the registered

manager was very experienced, easy to approach and was always open to suggestions in how to improve the quality of care provided. Quality of care was reviewed and monitored frequently to ensure that the quality of care was not compromised and changes could be made to improve the service if required.

Further information is in the detailed findings below.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good

### Is the service responsive?

Good ●

The service remains Good

### Is the service well-led?

Good ●

The service remains Good.

# Voyage 1 Limited - 694 Pinner Road

## **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 comprehensive inspection took place on 3 August 2017 and was unannounced.

One inspector carried out this inspection.

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 also checked the information that we held about the service and the service provider including notifications about significant incidents affecting the safety and wellbeing of people who used the service.

During this inspection we observed how staff interacted with and supported people who used the service. We reviewed three care plans, four staff files, training records and records relating to the management of the service such as audits, policies and procedures. We spoke with two people who used the service during the inspection and spoke to one relative after the inspection. We also spoke with the registered manager, the operation manager and three support workers.

# Is the service safe?

## Our findings

The majority of people were unable to verbally communicate due to their disability. People who used the service conveyed by their body language that they felt safe and happy at Voyage 1 Limited – 694 Pinner Road. For example, one person smiled and said 'yes' in response to the question if they felt they were safe. One relative told us "I am happy with the care [person's name] gets and I know [they are] safe." One comment made by a relative during last year's quality survey was; "The support my relative gets is excellent, there is always plenty of staff available."

Staff told us that they had received safeguarding adults training. Training records viewed confirmed that all 16 staff had received safeguarding training and regular refresher training was provided, which ensured training was always up to date. Staff gave us practice examples of how they would recognise abuse and told us that they would report any allegations of abuse to the registered manager, operation manager, local authority, police and/or Care Quality Commission [CQC].

We viewed three care records which included risk assessments for any actual and potential risk people could experience as part of the care they received. The risk assessments were rated green, amber and red and the higher the risk was rated, the more detailed the risk management plan described how to minimise the risk. Staff told us that they found the risk assessments important and they helped them to work consistently with people and keep people safe.

Relatives and staff told us that there were sufficient staff deployed to meet people's needs. One relative told us "There are enough staff around [person's name] goes out regularly and has been on holidays, staff are always very friendly when I call." Observations made during this inspection confirmed this. The registered manager and care staff told us that additional staff were provided when people attended unplanned activities or had to attend appointments. The provider's recruitment procedures ensured all staff were vetted and checked to ensure they were safe to work with vulnerable people.

Medicines were managed safely. Training records and comments made by staff confirmed that they had their medicines competency assessed to ensure they administered medicines safely. The registered manager told us that competency assessments were refreshed every year to ensure staff followed the correct procedures. Medicines records viewed were of good standard, they were audited regularly by staff and the registered manager, and this ensured that any discrepancies were dealt with as soon as possible. Since our last inspection the provider had fitted lockable medicines cupboards in people's bedrooms. The registered manager told us that this helped people to gain greater independence in the administration of their medicines.

The home was clean and free of offensive odours. We were told by staff that they were very proud of providing a clean environment. One care worker told us "I like a clean house at home, so why should it be different here?"

# Is the service effective?

## Our findings

One person told us "I like the food here it is very good." A relative said "The staff are very good they know what they are doing, I think they get enough training." Feedback received from a visiting health care professional during the annual service review in July 2016 was very positive, they wrote. "Staff have a comprehensive understanding of all service users." One relative said "They are very good about all health related appointments and they keep an eye on health things, for example they did very well with [person name] recent change in mobility. They keep me informed and involved and will always call me if anything changes."

Staff told us that there was a lot of training available and that it was very easy to access. Staff had access to electronic and classroom based training. This included mental capacity act [MCA] and deprivation of liberty safeguards, food hygiene, health and safety, manual handling, managing behaviours that challenge the service and first aid. We viewed the training matrix and saw that all staff had completed the training offered by the provider. New staff received very detailed induction training linked to the Care Certificate. The Care Certificate is a set of standards that social care and health workers keep to in their daily working life. All staff spoken with told us that they received regular supervision and appraisals; which was confirmed by records we viewed in staff files.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Where staff suspected that people lacked capacity an assessment had been carried out. We saw that all the people using the service had a standard DoLS authorisation that had been issued by the relevant supervisory body.

People were provided with a well-balanced and nutritious diet. People were involved in choosing their own menu during the weekly residents' meeting. Staff told us that they used photos and pictures which they showed people to help them to choose their meal. The menu was varied and everyday two alternatives were provided for people to choose from. Staff told us that people were involved in food shopping, and we saw that people were free to come and go in the kitchen. Staff told us "We will take people to help and buy ingredients and food."

The home had very good links with community healthcare professionals. Staff responded quickly if people's health needs changed. For example one person required an assessment by a specific clinician due to deteriorating health issues. We saw that the service had taken appropriate action for the assessment to be carried out and adaptations had been put into place following the clinician's advice. These meant people's changing health needs were responded to and addressed.

## Is the service caring?

### Our findings

People told us that staff were good, kind and caring. One person told us "[Staff member's name] is very nice I like her." The relative spoke highly about the staff team, the support provided and caring attitude of staff. The relative said "Staff are very good; they are very caring and do their best for [person's name]." Compliments collected by the provider from visitors included "I would like to take this opportunity to thank you and all your staff for the excellent care you given to [person's name]."

Care plans were person centred and contained information regarding people's likes, dislikes, interests, history and hobbies. The care plans were reviewed on a regular basis and updated as and when necessary. People who used the service and their relatives were involved and invited to review meetings. One relative told us "They always invite me to review meetings." People's views were respected and their choices such as whether they liked to do certain things were respected. Comments and compliments from people who had contact with the service expressed consistently that people were treated with dignity and respect. People were supported to enhance and maintain their independence. One relative told us "While [person's name] requires staff to help them, they still push them to do things on his own."

We saw that people felt comfortable in their home and with the staff supporting them. People lived together for a very long time and formed deep bonds and friendships between each other. The registered manager told us that the home had developed good relationships with health and social care professionals who were easy to access when additional support was required. For example the provider had access to behaviour therapists, who would visit the home and work together with the staff team and people to establish the best approach in how to manage behaviours that challenged the service. This helped people to deal with their behaviours more pro-actively and ensured a consistent approach from the staff team.

Staff demonstrated good understanding of the importance of confidentiality. Care records were stored securely in the office. Staff told us that they would not disclose people's personal information to anybody unless it had been agreed by the person or it was in the person's best interest to do so. We observed care staff returning care records to the designated locked cupboards once they had finished updating the paperwork.



# Is the service responsive?

## Our findings

People and their relatives were involved in the planning and reviewing of people's care and support. One relative told us, "Staff at Pinner Road work very hard to get [person's name] to the day centre and he has been on holiday to Butlins this year." A best interest assessor who visited the home in November 2016 left the following feedback in the compliments book, "The care plans are very well written and all required information is very easy to find." Staff demonstrated good understanding of people's needs and told us "We know the people we support well, but will always try out new things and activities."

Care plans were person centred and very detailed, they included information about the person's past, examples of a day in the person's life and short as well as long term goals. These were reviewed monthly by the person's key worker and the person and also every six months in more detail, together with the person's next of kin and social worker. Care plans reflected people's changing needs and had been reviewed and updated to respond to these needs. This was highlighted by one relative who said. "They did marvellous to help [person name] to stay at Pinner Road, I am very pleased."

Staff demonstrated good understanding of people's individual needs and they told us that they were given sufficient time to ensure care documentation was updated in a timely fashion. Daily care records provided clear detailed information of people's activities, their moods or any behaviour that challenged the service. Staff told us that the daily records were useful and that they used them for reference if they had been off duty.

People were engaged in a wide range of in-house and community based activities. During the day of our inspection some people went to the day centre, one person went to a local football club for football training. Activity records showed that people went swimming, horse riding, to café's, pubs, annual holidays and one person had started volunteering for a local charity. We also observed people had the freedom to relax in the lounge or their rooms if they wished to do so. The atmosphere during our inspection was very relaxed and staff took time to sit and chat with people or encourage them to take part in household chores, such as setting the table or cooking.

One relative told us they would talk to the registered manager, or staff, if they had any concerns. "The manager is very good and I would always call her if there is anything I would like to discuss, I raised concerns in the past and they were always resolved quickly and satisfactory." The service has an appropriate complaints policy. At the time of our inspection there were no open or recent complaints. We saw that the home received one complaint in the past twelve months, which had been responded to and dealt with appropriately.

## Is the service well-led?

### Our findings

The home has a manager registered with the Care Quality Commission. 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 legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Relatives, staff and feedback viewed in the compliments book was positive and spoke highly of the leadership at the service. Comments regarding the registered manager included she was very experienced, easy to talk to, very supportive and listened to comments made to improve the service. One relative told us "The manager is very good she listens and always tries to make improvements." Staff comments about the registered manager included "She is excellent, she would always listen to what we have to say and is happy for us to try out new things for the benefit of the people we support."

Staff told us they found the supervision sessions, appraisals and team meetings useful. They said that feedback was always given in a constructive way. One staff member told us, "The regular supervisions really helped me to improve on my performance and become a better support worker." Another staff member said "We have regular staff meetings, the meetings are like an open forum as well and we can raise ideas to improve things."

The provider has a legal duty to inform the CQC about changes or events that occur at the home. They do this by sending us notifications. We had received notifications from the provider when required.

The registered manager completed regular audits and spot checks to ensure the quality of care was monitored and maintained. Appliances such as heating, gas supply, water supply and electrical installation were checked regularly by external contractors. Quality audits were carried out monthly or quarterly and these included health and safety, medication and fire safety amongst others.

All accidents and incidents which occurred were recorded and analysed. The time and place of any accident was recorded to establish patterns and monitor if changes to practice needed to be made.