

Oakview Estates Limited

Toller Road

Inspection report

13 Toller Road
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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

The inspection visit took place on 4 and 7 August 2017. The visit was unannounced.

Toller Road is a residential home which provides care to people with learning disabilities and mental health needs. It is registered to provide care for up to eight people. At the time of our inspection there were seven people living at the service.

There was a registered manager in post. 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 and associated Regulations about how the service is run.

People continued to receive safe care. Staff had received appropriate adult safeguarding training and were, in the main, aware of their role and responsibilities to protect people from avoidable harm. Risks associated with people's individual needs had been assessed and plans were in place to mitigate any risks.

Staff underwent appropriate recruitment checks before they started their employment. Sufficient staff had been employed to meet people's individual needs. People were supported to receive their medicines safely.

People continued to receive effective care and support. Staff received an appropriate induction, ongoing training and opportunities to discuss and review their work, development and training needs.

The principles of The Mental Capacity Act 2005 had been applied where required. People were supported with any dietary and nutritional needs. They received support to maintain their health.

People continued to receive good care. People had developed positive relationships with staff who understood their needs. Staff were caring and they treated people with respect, kindness and dignity.

People continued to receive a service that was responsive to their individual needs. Staff had information available to support them to provide an individualised service based on people's needs, preferences and routines. The provider had a complaints policy and procedure and complaints were investigated. The service people received had been monitored to ensure it met people's needs so that they could enjoy a meaningful and stimulating life.

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; Safe.

Is the service effective?

Good ●

The service remains; Effective

Is the service caring?

Good ●

The service remains; Caring

Is the service responsive?

Good ●

The service remains; Responsive

Is the service well-led?

Good ●

The service remains; Well Led

Toller 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 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 on 4 August 2017. The inspection was unannounced. The inspection team consisted of one inspector and one expert by experience, who spoke with people to get their views about the service they received. The expert-by-experience was a person who had personal experience of the support of people with learning disabilities.

We looked at the information we held about the service, which included 'notifications'. Notifications are changes, events or incidents that the provider must tell us about.

We contacted commissioners for social care, responsible for funding some of the people who used the service and asked them for their views about the agency. The local authority commissioners stated there had been no issues raised in their most recent inspection.

Before the visit to the service we asked the provider to complete 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 what improvements they plan to make. The PIR was returned to us and set out how the staff provided quality care to the people living at the service.

During the inspection we spoke with four people who used the service, two relatives, the registered manager, four nursing and care staff members, the activities organiser, the housekeeper, the chef and the maintenance person.

We also looked in detail at the care and support provided to two people who used the service, including their care records, audits on the running of the service, staff training, staff recruitment records and medicine administration records.

Is the service safe?

Our findings

All the people spoken with, except one person, said that they felt safe at Toller Road House. The relatives we spoke with also felt their family members were safe there.

The person who said they didn't feel safe said they didn't like the other people living at the service or the staff. We discussed this with the registered manager who gave us background information on the person's history and we were satisfied with this explanation.

Staff had received safeguarding training. They were able to discuss the different types of abuse people may be subject to and described their role in preventing this, though not all staff were aware of relevant external agencies to refer to if necessary. The registered manager said this would be followed up with staff so they were all aware of relevant agencies. We saw that the provider had worked with local authorities to protect people from harm and prevent abuse.

Staff knew about assessing risks people faced and how to promote their safety, whilst encouraging their independence. Risk assessments explaining how this should be done were included in people's care files. We saw that an investigation had been carried out for a staff member who had been identified as using approved restraint procedures incorrectly. This showed that the provider took action if any area of the service was unsafe.

Records showed that safety checks of the premises had been carried out at regular intervals, including fire checks. We queried why some staff had not taken part in fire drills for some time. The registered manager said this would be addressed. Some premises issues had been identified in checks as needing attention. After the inspection the registered manager confirmed they had been carried out.

One relative told us how her family member had moved from an upstairs to a downstairs bedroom to downstairs when staff identified they might be at a problem with the person's balance and had a risk of falling. The relative told us that, "This suits all." Staff had therefore ensured the person's safety was protected.

People told us staff had always been available to support them. For example a person said there was "always someone around." A relative said, "What I've seen (staff) always attend to [my family member] promptly."

Everyone told us that there were enough staff to meet their needs, except one person who said there needed to be more male staff. We saw that a sufficient number of male staff were employed, so this did not appear to be an issue in practice as the person's safety was ensured.

People were supported by staff who had been through required recruitment checks to prevent unsuitable people providing care and support.

People told us they receive their medicines on time and were provided with any support they needed to take

their medicines. Staff described how they supported people's with their medicines. Records were kept to show people had received their medicines as prescribed

Is the service effective?

Our findings

The people living at Toller Road House all felt that the staff were trained and knew what they were doing when providing personal care to them.

They told us they felt staff knew how to support them and to communicate effectively. One person said, "Yes, they're quite good." One relative told us, (staff are) "Capable of meeting his needs. They seem to know what they're doing."

Staff said that the training they had received had been effective in giving them the right skills and knowledge to enable them to support people appropriately. One staff member said, "We get lots of training. If we need any more we just go to the manager and this is arranged."

Staff training records showed staff were largely up to date with the training they were expected to have completed and more training was planned. Some staff were not trained in autism despite some people using the service being diagnosed with this condition. The registered manager later sent us information that this training had been arranged.

People had the opportunity to give their consent to their care and support and make decisions for themselves. Other people spoke of staff asking for their agreement before providing any support and listening to what they said about this. Staff described how they ensured people consented to the care and support they provided and made choices about this. Where someone did not have the capacity to make a decision for themselves the Mental Capacity Act 2005 was followed in order to make a decision in the person's best interest.

People spoke positively about the food they were provided with. One person said, (I) "[I] enjoy it. (Named chef) is a good cook." One relative said, "[we were] invited to a tea party a few weeks ago, the food was wonderful."

The dining room noticeboard displayed the day's meals in picture and written format, with traffic lights indicating how healthy items were. We observed lunchtime. This was relaxed and unhurried with people eating when they were ready. People and staff sat eating together. Staff showed awareness of people's dietary needs. When someone indicated they would like a second helping, staff cut up the food so it was easy for the person to eat.

Some people told us they were able to prepare their own meals and others said they received support from staff with doing this. Staff described providing people with meals and any support they needed to eat these.

People told us that staff supported them to attend health appointments. One relative said, "Any problems they [the staff] tell me." One person explained they had been to hospital. Staff explained that when the person was in hospital, two staff had stayed with them during the day to support the person.

People told us that staff knew about their healthcare needs and they received support with regard to their health and wellbeing. There was evidence in people's care plans that people received health services to ensure their physical and mental health needs were met.

Is the service caring?

Our findings

All the people at Toller Road, except one, told us staff were kind, and caring, friendly and supportive. We observed this to be the case when we witnessed discussions between people and staff.

A picture of the independent advocate was displayed on a noticeboard to help people if they wanted support in expressing their views to staff. An advocate is someone who helps people to express their views and opinions to staff and management of the service. Everyone knew the advocate's name and knew they could speak with them if they needed their help.

We saw that staff assisted a person to help them communicate. They showed good understanding of the person's verbal communication.

People told us they choose what they wanted do. One said, "I want to go to art classes." Staff said they had offered details of local classes and the person was considering whether to go. This showed us that people's choices were respected.

Everyone told us it was their choice when they went to bed and got up. One person said they went to bed late and got up early as that was their preference. said, "(I) go late, go when I want, up early."

The monthly residents meeting minutes showed there had been a discussion about new lounge sofas and people had been shown a variety of colours. They had chosen the colour of the sofas. The minutes were detailed with follow-up actions recorded.

Staff told us that a person's birthday was soon. They said that the person enjoyed cowboy films so a cowboy theme party was being planned. This told us staff were aware of people's likes and dislikes and were thoughtful about planning activities people would enjoy.

Is the service responsive?

Our findings

People, apart from one person, were very positive about the personal care they received from staff. Relatives were also very complimentary about the personal care their family members received.

We saw that staff members had a good understanding of the people they supported and knew how to respond to. For example, about how the service dealt with behaviours that challenged the service. Staff said this approach was successful due to their knowledge of the people's likes and dislikes, combined with encouraging them to make positive behaviour choices.

We saw that staff noticed a person was not wearing their hearing aid. When they found it they saw a part was missing. A staff member went out to get the aid fixed and the person was able to wear it again. This was an example of a staff member responding promptly responded positively to the person's need enabling them to communicate more easily again.

Staff members told us the care plans gave them the guidance on how best and direction to provide people with the care and support they needed. Care files we reviewed described the care and support people required. The plans had been kept up to date with people's changing needs.

People told us about how they liked to spend their time. One person said, "I help ([the housekeeper]) out, [get) paid and, buy chocolate spread." Another person told us he "Went to Skegness with staff in the car, to see Ken Dodd." One relative said her family member is, "Taken home to see his mum. He enjoys going out in the car."

The activity co-ordinator explained she spent time with people each week planning what they wanted to do. The activity rota showed that people were doing activities they liked such as going out, meal preparation, shopping and cooking, walks and watching films. The activity co-ordinator said, "I ask people who they wish to go out with." This responded to people's needs to be able to enjoy their activities in the company of people they chose to spend time with.

Staff told us how people cooked their own meals in the training kitchen. We saw one person looking through recipes. He said, "Today [I'm] cooking, [I'm] going out for ingredients, [I] like cooking."

Everyone told us that if they had any concerns they would raise them with staff or the registered manager. One person said they would inform "A member of staff or advocate." Relatives told us they would speak to the registered manager if they had a concern.

People were given opportunities to raise any concerns and they were told how they could make complaints. A copy of the provider's complaints procedure was displayed near the main lounge. Records made of complaints received described what the outcome of the complaint was. There was no evidence of feedback to the complainant. The registered manager subsequently stated a response was provided to the person in a format that was appropriate to their individual communication needs.

Is the service well-led?

Our findings

People, apart from one person, said that they liked living at the service. Relatives also told us that they thought there was a positive culture of promoting people's interests and keeping people safe at the service. People praised staff and the registered manager for the service they received.

One relative said, "[I] can't praise Toller Road highly enough, it's been the best [service my family member has been at [home he has been in]]. He is happy."

A staff member told us that they loved their job and enjoyed the company of people living in the home. They told us, "The manager is excellent [and] I'm part of the team." We observed a staff member in the garden during their break, singing and dancing with people, who enjoyed this spontaneous cuff activity.

We saw a "quality" noticeboard which showed the latest resident meeting minutes and surveys about the service. This included questionnaires for people about different topics such as exercise, family, noise levels and holidays. This indicated people's views were welcomed so that they had a say in the running of the home.

We saw many positive, friendly interactions between staff members and the registered manager and people living at the service.

Staff members told us they could speak with a member of the management team to get advice any time. Staff were aware of their duty to pass on any concerns should they identify any issues not being dealt with in an open and transparent manner. This is known as whistleblowing and all registered services are required to have a whistleblowing policy. Staff spoke positively about the service and said they would recommend it to friends and family if they needed this type of service.

Staff members we spoke with said the registered manager was very supportive. They all said the service was well managed.

We saw some survey forms completed by people who used the service. These contained positive responses to questions asked. We also reviewed records kept as part of the management of the service which showed issues had been addressed as needed.

The provider complied with the condition of their registration to have a registered manager in post to manage the service. Providers are legally required to display the rating we give them in the service and on their website if they have one. The rating from the previous inspection had been displayed as required.