

Walsingham Support Limited

Walsingham Support - Wedgwood Road

Inspection report

44-52 Wedgwood Road
Flimby
Maryport
Cumbria
CA15 8QX
Tel: 01900812863
Website: www.walsingham.com

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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	

Overall summary

This was an unannounced inspection on 17th September 2015.

Wedgwood Road provides personal care to up to four people living with autism. People live in their own tenanted properties on the site. Care is provided up to twenty four hours a day.

The service has a registered manager who also manages other locations for the Walsingham organisation. 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.

Summary of findings

Staff had received training on ensuring people were kept free from harm and abuse and were confident in management dealing with any issues appropriately. Walsingham had a confidential phone line for staff to report any concerns.

Good risk assessments and emergency planning was in place. Accidents and incidents were monitored and 'lessons learnt' sessions held following incidents.

We saw that staffing levels were suitable to meet the assessed needs of people in the service. Staff recruitment was thorough with all checks completed before new staff had access to vulnerable people. The organisation had robust disciplinary procedures in place.

Medicines were well managed. People had their medicines reviewed by their GP and specialist health care providers.

Staff were trained in infection control and supported people in their own environment.

We had plenty of evidence to show that the staff team at Wedgewood road were supported to develop appropriately. Staff were keen to learn and we saw that induction, training and supervision helped them to give good levels of care and support.

Staff were trained in restraint and in techniques that would help people who presented challenges both behaviourally and emotionally. Staff understood consent and the duty of care they had to support people to make appropriate choices.

People were supported to eat and drink healthily. Staff used specialists when there were issues around diet and nutrition. People were supported to get good health care support from community specialist and consultants.

People in the service lived in their own specially adapted tenancies that were secure and safe for people living with autism.

Staff we spoke to displayed a caring attitude. They understood how to support people and help them maintain their dignity and privacy. Staff showed both empathy and respect for people living with the symptoms of autism. People in the service had access to advocates.

Everyone supported by the service had been appropriately assessed. Each person had person centred plans, behavioural plans and support plans that staff followed closely.

People were encouraged to go out and to engage, where possible, with sport, learning and social events. Staff were aware of how difficult this was for people and planning for activities was done slowly and in depth.

Complaint procedures were in place. There had been no complaints received about the service.

The service had a suitably experienced and qualified registered manager. The day to day management was delegated to a project manager who was also suitably qualified and experienced. Staff said that management visited the service regularly and were aware of how things were in the service. Staff understood the scheme of delegation.

Staff displayed the values that Walsingham's managers expected. The staff team understood the needs of people with autism and worked within the culture of the organisation.

Wedgewood Road followed the quality monitoring processes of the organisation. There were regular internal and external audits of all aspects of the service. Changes were put into place after evaluation of the service.

Good recording systems were in place and these covered all the support needs of the people in the service.

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.

Staff were aware of their responsibilities in keeping people safe from harm and abuse.

The service employed enough staff to deliver safe care.

People were appropriately supported with medicines.

Good



Is the service effective?

The service was effective.

Staff received good levels of training and support.

Staff understood legislation related to the mental capacity act.

People were supported to eat healthily.

Good



Is the service caring?

The service was caring.

Staff showed empathic and caring approaches to people in the service.

People had access to advocacy.

People were supported to retain their dignity and privacy.

Good



Is the service responsive?

The service was responsive.

Assessment was on-going and health care professionals were involved in the process.

Person centred plans were detailed and up to date.

Activities and interests were encouraged.

Good



Is the service well-led?

The service was well led.

The service had an experienced and suitably qualified registered manager.

There was a scheme of delegation with a project manager who led the day to day work of this service.

There was a quality assurance system in place that monitored the service.

Good



Walsingham Support - Wedgwood 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 17th September 2015 and was unannounced.

The inspection was carried out by the lead adult social care inspector.

Before the inspection we reviewed the information we held about the service, such as notifications we had received from the registered provider. A notification is information about important events which the service is required to send us by law.

We also asked the local learning disability team and local health care providers for information about the service. We had contact with staff from health and the local authority who purchase care on behalf of people. We planned the inspection using this information.

We spoke to one of the people supported by Wedgwood road. The three other people in the service did not wish to participate in the inspection.

We observed staff working with two of the people in the service.

We spoke to four relatives by telephone after the site visit.

We read all four care files. These included assessments, person centred plans and behavioural planning. We also saw records of assessments made by health care professionals and social workers.

We looked at the records of quality monitoring which included all aspects of the service. We checked on fire and food safety records. We looked at medicines management. We checked the recording of money kept on behalf of people.

We met with the manager of the project and with eight support workers. We read four staff files and we saw training workbooks and other evidence of staff induction and training. We also looked at recruitment files for two new members of the team.

Is the service safe?

Our findings

We spoke with one person who was cared for by the staff team and they told us that they felt "very safe". This person also told us that staffing levels were "fine" and that the staff gave them plenty of support with their medicines.

We also spoke with relatives of the people who live in Wedgewood Road. One person told us: "We feel really relaxed because of the staff...it is safe for our relative and safe for the staff."

We met with staff in the service who could talk about their responsibilities in relation to safeguarding. They told us that they had on-going training about this and that they could talk to their line manager in supervision about anything of concern. Walsingham had a 'whistleblowing' phone line that staff could call anonymously if anything worried them. The managers of the service understood how to support people and how to prevent abuse. We had evidence to show that the organisation took safeguarding seriously and dealt with any concerns appropriately.

We had a lengthy discussion with a group of staff who were keen to talk about discrimination and human rights. They were able to discuss risk and the duty of care they had to the people they cared for. We judged that the staff team had a really good understanding of these concepts. We also had evidence to show that these concepts were applied to the care that was delivered on a daily basis.

Each person who received care from the service had suitable risk assessments in place. The risk management plans were detailed because each person who was in receipt of care had very complex needs. There were emergency plans in place for each of the tenants in the service.

Accidents and incidents were recorded in detail. The team held 'lessons learnt' discussions after even minor incidents. Risk management was working well and staff pre-empted any difficulties arising out of the behaviours of people living with autism.

We looked at the rosters for the service and we spoke to staff and to the person who managed the project. Each member of staff was allocated to one of the tenants and we saw that the hours allocated to each person were suitably covered. Staff said that there were enough of them to give people support. Staff, management and relatives said that keeping the same staff team was vital for the people who lived in the service.

We spoke to the manager about how they managed this. They said that they tried to keep teams of people who individuals responded to and explained how they minimised change and how they tried to introduce new staff slowly. The team felt that this was one of their biggest challenges and they put a lot of effort into helping people manage staff changes.

We looked at recruitment in the service and spoke to some members of staff who had only been in the service for a short time. They confirmed that background checks were made prior to them having any contact with vulnerable people. We had evidence to show that Walsingham recruitment was done appropriately to protect people. One person in the service was involved in the recruitment process.

We also had evidence to show that disciplinary procedures were managed well by the organisation. There had been no disciplinary action taken in this service.

Staff confirmed that they had received training and competency checks in relation to the management of medicines. We looked at the medicines kept on the behalf of one person and the Medicines Administration Records for everyone cared for by the service. These were in order. People had their medicines reviewed by the GP and by the psychiatrist.

Staff had received training in managing infection and there were good systems in place to help support people to maintain good infection control within their own environment.

Is the service effective?

Our findings

We spoke to someone who used the service who told us that they thought that the staff were "really good" and that they understood the needs of people who lived in the tenancies at Wedgwood Road. They also told us that the staff asked their permission before any interactions. We also learned about the support that was given to this person in budgeting, shopping and preparing food. They told us that the support they received was effective. They said that they were "quite happy with everything".

We looked at the training matrix for the service and at some records of training for the staff. We saw that staff received on-going training that covered all aspects of the work they undertook. Staff said that they not only had training about basic skills but also had training that related specifically to the individual needs of people in the service. All the staff had received training on autism and they displayed a good knowledge of the disorder. We looked at the training record for one member of staff who had attended 34 different training sessions in 18 months. We saw some workbooks that staff were using. The team told us that they were all studying a different topic in depth and cascading some of their learning to the other people in the team.

We saw evidence to show that staff in the service were given regular supervision and appraisal. These one-to-one sessions covered the work they did with individuals, staff training and learning and ensured that each member of staff was supported to develop appropriately. New staff had received induction and within months of their start date they had completed all the training that Walsingham deemed to be mandatory.

Staff in the service also understood their responsibilities in relation to gaining consent. One person who lived in the service said that they had plenty of choice and were asked for consent but "there are rules and I understand why".

There had been no incidents in the service where any person had been restrained. All staff were trained in supporting people who may display behaviours that challenge. Staff said that because people lived in their own tenancies non-intervention was often the most appropriate way of dealing with these behaviours. Staff told us that they felt confident in managing some of the issues people had and that they did a lot of work to identify triggers that might cause people to get upset. The records gave us evidence to show that this approach was effective.

Each person who was supported by the staff team was supported to eat and drink. Some people were able to participate in shopping, cooking and managing their own dietary needs. We had evidence to show that where people were not eating well the staff took advice from dieticians and other professionals.

We looked at the care files for everyone who was supported in this service. We had evidence to show that people received suitable health care support. Each of the tenants had appropriate support from psychiatrists and psychologists who were specialists in the care of people with autism. They also had regular contact with the local GP's and community nurses. Staff encouraged and supported people to go to appointments with other health professionals.

Wedgwood Road was specifically designed and built to meet the needs of people living with autism. Individual adaptations had been made to meet the needs of people in the service.

Is the service caring?

Our findings

The person who was happy to engage with us told us that they thought "the staff do care about us." A relative told us that they felt that the staff were "very good...brilliant really and it has helped our (relative) so much."

We observed staff interacting with two of the four people in the service and we saw that they had a caring and sensitive approach to people. We also heard staff talking about strengths and needs of individuals in the service and we judged from this that the staff did care about each individual person.

Staff were keen to discuss the relationships they had with individuals. We noted that staff talked more about individual strengths than they did about behavioural issues that people might have. We observed genuine acceptance and caring. Staff displayed appropriate values when talking about people with learning disabilities and people living with autism.

We heard staff involving individuals, explaining issues with them and giving them information about the levels of support they were to receive. We noted that staff could use humour appropriately and they had an easy, yet respectful, approach to individuals. Each relationship the team had with people in the service was analysed and staff could talk in detail about how to interact with each person.

The staff team told us that it could take many months before a new team member could work with the people in

the service. They explained how they did this and were fully aware that change could lead to distress for people with autism. They explain to us how they had worked with the local community nurses when one person needed their support. We judged that the team were sensitive to individual needs.

People who lived in Wedgwood Road could access advocates where necessary. Some people had relatives who would act as advocates on their behalf when necessary. The staff team worked with families in an open and appropriate way.

Staff could talk about confidentiality and privacy. People were given their own personal space without staff presence. Individual person centred care plans gave details of how to support people to be as independent as possible. We saw that people had been encouraged to be independent and that progress was being made with this. Staff were aware that this could take a lot of time and they felt that they had done a good job with people because they had helped them to stabilise. We saw that the care the staff team gave had helped people to be settled and to gain more independence.

Staff were able to discuss how they supported people to be dignified. Sometimes this was done through very complex and detailed care planning. Staff explained the measures they had to take to ensure this happened. This work was done with the guidance of a clinical psychologist.

Is the service responsive?

Our findings

One person went through their individualised care plan with us and could talk to us about how the plan had been devised. They said: "What I want is written down so that everyone who helps me knows what I like and what I don't like."

We read all of the person centred plans and the other documents kept on file about each individual. The care files contained very detailed assessments of individual need. There were assessments completed by social workers and by psychiatrists or psychologists. The staff had also completed their own assessments of the support and interventions needed. These were extremely detailed and all aspects of each person's care had been carefully assessed. Assessments were reviewed on a regular basis. Any changes to a person's support needs then led to a re-assessment.

The assessments were then used to develop person centred plans, behavioural plans and support plans. The person centred plans gave details of preferences, interests and aspirations. Behavioural plans had been developed with the support of specialists. These plans involved both the input of psychiatrists and a professor of clinical psychology. Where people had difficulties with managing their behaviour the staff team had developed very intricate and complex plans to counteract some of these issues.

We judged that these care plans were person centred, detailed and comprehensive. We could see that the use of structured care planning had allowed people to become very stable and, in some cases, to develop and change. Staff were very aware of the need for formal care plans and new staff were encouraged to learn and understand all the guidance contained within the plans.

People who lived at Wedgwood Road had individual weekly planners that gave them a structure to each day. Some people went out to shop and to activities. A great deal of planning went in to these individual activities. The staff had made arrangements so that activities could be undertaken without unsettling the individual. In some cases people were supported to attend classes and to participate in social activities.

Activities, hobbies and entertainment were individualised and were arranged around the preference of each person. We had evidence through discussion with the staff and in case files to show that individual needs were the focus of the work staff did.

The service had a suitable complaints procedure and service users had access to this. The procedure was in an 'easy read' format. There had been no formal complaints received.

Is the service well-led?

Our findings

We spoke with one person in the service who told us that they were satisfied with the arrangements in place. A relative told us that they judged the service to be “an excellent set-up...there should be more like it.”

This service was managed by a suitably experienced and qualified registered manager who had responsibility for other personal care services in Cumbria. The day to day management of this service had been delegated to a project manager. The scheme of delegation was understood by people in the service and by the staff teams.

The staff we spoke to said that they could contact the registered manager if anything concerned them. They also told us that the registered manager visited services in the west of the County for two or three days a week. They were confident that the registered manager was aware of how well the service was operating. They also told us that they saw the registered manager's line manager on a regular basis. Even very new members of the team understood the scheme of delegation.

Staff spoke about the manager of the project and said that he was very involved in all aspects of the service. Senior support workers visited regularly and gave staff supervision, checked on care delivery and completed quality monitoring checks.

We had evidence of on-going quality monitoring in the service. Staff were expected to record care and support delivery and make frequent checks on things like money and medicines. Senior support workers checked these quality audits and in turn these were monitored by the project manager and the registered manager.

There was also an external quality monitoring system in place. Financial audits were carried out at least every six months. There were monthly external checks on the

operation and an annual audit of quality matters. A report was prepared on how well the service was operating and this went to the chief executive of Walsingham. Senior officers of the organisation visited Cumbria and spoke with people who received services, professionals and families. We judged that quality monitoring systems were working well in this service.

We were made aware of the vision and values that Walsingham had because each individual member of staff we met spoke openly and naturally about these. There was a focus on training and development which supported staff in their understanding of the values of the organisation. We looked at some of the policies and procedures of the organisation. We saw that staff were expected to read these, understand them and work within them. We judged that this meant that staff teams followed the organisational values.

We had lots of evidence to show that the management team encouraged staff to question values and working practices. We also judged that the staff in this service were keen to evaluate the work they did as a team. We also saw that individuals were supported to reflect on their own practice and to develop appropriately.

Before we undertook this inspection we spoke with other professionals who were positive about the way the staff team worked in partnership with them. They told us that staff asked for help appropriately. We learned that any support and guidance was incorporated into the approach that was taken through care planning.

The staff team kept detailed and comprehensive records of all aspects of the service. We saw records relating to infection control, fire and food safety, care delivery, medicines, transport and staff performance. All of these records gave a good picture of how well the service was operating.