

United Response

# United Response - 4 Highgate Park

## 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

United Response - 4 Highgate Park is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service provides accommodation for up to four adults in one adapted building. The service does not provide nursing care, but specialises in supporting people who may be living with a learning disability or physical disability.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

The inspection took place on 14 December 2017 and 3 January 2018. The provider was given 48 hours' notice of our inspection because we needed to make sure someone would be in the location when we visited. On the first day of our inspection, there were three people living at the service and four on the second day.

At the last inspection in October 2015, the service was rated 'Good'. At this inspection, we found the service remained 'Good'.

During our inspection, people who used the service told us they felt safe. The provider had safeguarding policies and procedures in place and staff understood their responsibility to safeguard the people they supported. We found the environment was clean and necessary health and safety checks were completed.

We found medicines were administered safely.

Staff ensured that people had enough to eat and drink and people had choice about their diet. We observed staff had established a rapport with the people they supported and treated people with dignity and respect. Staff received supervisions and appraisals and described feeling well supported by the registered manager. 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.

We found care records were person-centred and contained detailed information about people's lives. People's support was regularly reviewed and records were updated when there had been a change in their needs.

We received very positive feedback, without exception, about the registered manager. The registered manager considered ways to adapt the environment and improve the support provided to people. The

registered manager and provider had systems in place to monitor the quality of the service provided.

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.

# United Response - 4 Highgate Park

## **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. The inspection was planned to check whether the provider was 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.

The inspection site visits took place on 14 December 2017 and 3 January 2018 and were announced. We gave 48 hours' notice of our inspection because we needed to make sure someone would be in the location when we visited. The inspection team was made up of two inspectors.

Before our inspection, we reviewed information we held about the service, which included information shared with the CQC and notifications sent to us since our last inspection. Notifications are when providers send us information about certain changes, events or incidents that occur and which affect their service or the people who use it.

We used information the provider sent us in the Provider Information Return to plan our inspection. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection, we spoke with two people who used the service and two people's carers. 'Carer' is a term which refers to a relative or friend who provides unpaid support to a person living with a disability. We spoke with three members of staff, the area manager and a manager from a different United Response service who provided support to the team in the absence of their registered manager. The registered manager was in post but unavailable during our inspection.

We had a tour of the service including communal areas and, with permission, looked in people's bedrooms. We observed interactions between staff and people who used the service including at lunchtime and during

activities. We also used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who cannot talk with us.

We reviewed three people's care plans and risk assessments. We looked at three staff files which included information relating to recruitment, training, supervision and appraisals. We also viewed medication administration records, meeting minutes, audits and other records relating to the running of the service.

# Is the service safe?

## Our findings

At our last comprehensive inspection, we found the service was safe and awarded a rating of Good. At this inspection, we found the service continued to be safe.

People who used the service were asked whether they felt safe living there. One person commented, "I like it here." Another person stated, "Yes. We are alright here." We observed people were relaxed, outgoing and clearly at ease in staff's company. This showed us people who used the service felt safe. A carer described having "total confidence in the service" and explained any concerns they had were addressed by staff.

The provider had a safeguarding policy and procedure in place and staff completed training to support them to identify and respond to safeguarding concerns. The registered manager had made one safeguarding referral in the last year and had taken appropriate actions following this. This ensured people who used the service were protected from the risks associated with abuse.

Where risks had been identified staff completed risk assessments and reviewed these when the person's needs changed. The staff had a clear understanding of the risks to people's safety and the support they required to reduce risks.

Records evidenced staff and management took appropriate action following an accident or incident to keep people who used the service safe and prevent reoccurrences. We saw examples of accidents or incidents been discussed in team meetings in order to learn from what had happened.

There were sufficient numbers of staff in place to ensure people's safety and spend time with them. We observed staff continually interact with people, through activities and conversation, and people received assistance when they required it. The carers we spoke with had no concerns about staffing levels within the service. We found some people wanted to attend church, and required support to do so, but in recent weeks there had not been enough staff on a Sunday morning to provide this support. We spoke with the area manager who agreed to address this.

Systems were in place to ensure people received the support they needed to take their prescribed medicines. Records evidenced staff had training and the provider was in the process of completing their annual medicine competency checks to test staff's knowledge and understanding of best practice relating to the safe management of people's medicines.

We spoke with the area manager about ensuring staff checked and countersigned handwritten prescribing instructions to make sure these had been copied correctly and to review information which guided staff on when to administer 'as and when required' (PRN) medication. The area manager agreed to address these minor recording issues.

Regular checks and on-going maintenance were completed to ensure the safety of the home environment. Systems were in place to assess and manage the risks associated with a fire and to support staff to safely

evacuate people in the event of an emergency.

The service was clean, tidy and appropriately maintained. Staff received training on infection prevention and control.

# Is the service effective?

## Our findings

At our last comprehensive inspection, we found the service was effective and awarded a rating of Good. At this inspection, we found the service continued to be effective.

We observed staff provided very skilled and effective care and support to maximise people's independence, promote their confidence and improve their wellbeing. Staff routinely recognised and understood what was important to people and were proactive in engaging and encouraging people to do the things they wanted to do.

Staff received training in the areas the provider considered mandatory, which included safeguarding adults, moving and handling and emergency first aid. Staff also completed 'refresher' training to ensure their knowledge and skills were up-to-date.

Staff received regular supervisions and annual appraisals of their performance. These provided an opportunity for staff to discuss their roles and responsibilities, any training or development needs they had and to identify goals as part of their continued professional development. We saw people who used the service contributed their views to the staff member's appraisal. This showed that people's view of the support they received from staff was important.

People who used the service had 'health files', which contained detailed information about the support required to meet their health needs. Staff worked closely with healthcare professionals to ensure they received coordinated care and support based on up-to-date clinical knowledge. We saw evidence of regular reviews from healthcare professionals and annual health check-ups were completed.

Staff provided skilled support to enable people to choose and prepare their own meals. A member of staff explained how one person had a meal they liked, but could not eat as it was not the correct texture to ensure they could safely swallow it. Staff then considered how this meal could be adapted and discussed this with a healthcare professional who agreed it would be suitable. This demonstrated to us that staff thought 'outside of the box' and supported people's likes and preferences.

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 MCA 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 make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

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). We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met. Some people who used the service had

authorisations to deprive them of their liberty in place and staff understood when this was required. We observed staff were proactive in ensuring people were not unduly restricted and respected people's right to make decisions and have choice and control over their daily routines. This demonstrated to us that the service continued to work within and promote the values of the MCA.

We saw the environment had been designed and adapted to maximise people's independence. There were photographs of people who used the service situated around the home and bedrooms were personalised for people's individual needs and preferences. The registered manager was in the process of updating the garden space to provide a fully accessible area which could offer further opportunities for stimulation, activity or simply to spend time alone outside.

# Is the service caring?

## Our findings

At our last comprehensive inspection, we found the service was caring and awarded a rating of Good. At this inspection, we found the care provided by staff continued to be good.

We received very positive feedback about the staff. A person who used the service described the staff as "very good". A carer said staff "talk to [the person], make sure [the person] is happy and give them choices". Another carer simply stated the staff were "first class" and described how a staff member had come into work on their day off to be available for a person's review.

Staff had received a compliment from a visiting healthcare professional who wrote, "The care staff knew them [people who used the service] so well, communicating and conversing with them with such a depth of knowledge and understanding, and at all times showing such a degree of respect to them." Another professional told us their own practice had been positively affected by the approach of the staff and described how staff challenged their advice to make sure it was right for the person.

Staff knew people very well and had developed extremely positive and genuinely caring relationships with them. They were very warm, friendly and attentive and people who used the service responded in a way which showed they valued the companionship and friendships they shared.

Staff supported people who used the service to ensure their privacy and dignity was maintained. A person who used the service said, "When I am getting ready for bed, all the curtains are shut." We observed the support provided in communal areas was discreet, dignified and respectful. A carer told us, "They [the staff] always ask [the person's] permission, rather than just doing." This showed us staff respected people's privacy and personal space.

Staff were skilled in supporting and encouraging people to make decisions. People who used the service had extremely detailed, comprehensive and person-centred communication plans in place. We saw 'decision making profiles' provided further guidance on how best to present information to support and enable people to make decisions.

A carer described how staff had considered adjustments which could be made to enable a person to be a part of running their own home. This included tools to aid the person to empty the dishwasher, peel the vegetables and put sugar in their tea. Staff supported people to answer the phone. We saw people enjoyed speaking and joking with callers and were helped to take and deliver messages to members of the team or people who used the service. This demonstrated a very person-centred approach to promoting people's independence.

People who used the service had access to information about advocacy services, which are independent organisations who support people to make important decisions about their lives. Carers advised us they were included in discussions about the person's support and were kept informed about any changes.

## Is the service responsive?

### Our findings

At our last comprehensive inspection, we found the service was responsive and awarded a rating of Good. At this inspection, we found the service continued to be responsive.

Staff completed detailed assessments which included people's needs, likes, dislikes and preferences. This information was used to create very comprehensive and person-centred care plans, which guided staff on how to meet people's needs. These records evidenced people who used the service and health and social care professionals were actively involved in shaping the care and support provided. Care plans also included information about people's abilities in addition to their support needs. For example one care plan stated "with hand over hand support I can with my left hand peel vegetables".

People's care plans were regularly reviewed. When there had been a change in a person's needs, this was reflected in their care plans and guidance had been sought from the relevant professionals.

Each person had a weekly 'activity plan', which outlined how they liked to spend their time. We saw people were supported to attend a wide range of activities outside of their home, which included going for meals, shopping and attending day centres. Whilst in the house, people were supported to engage in activities of their choosing such as having a hot bath, listening to radio programmes or engaging in a card making enterprise. Staff supported people to make telephone calls and buy presents for their friends and relatives to assist them with maintaining their relationships. Carers described always feeling welcome to the service.

Pictures of the staff due to work that day were displayed so people knew who would be supporting them. Staff supported a person to keep rabbits and the people who used the service and staff cared for them together. We saw this provided another way for staff to interact with people.

Regular 'house meetings' were held to share information and talk about any concerns people had. Staff and the people who used the service discussed plans for the coming week, which included activities, menu choices and who would assist with different tasks in the home.

The provider had a policy and procedure governing how complaints about the service would be addressed. Records showed there had been no complaints since our last inspection. People told us they felt able to speak with staff if they were worried and we saw accessible information about the complaints process was available.

Staff had received a number of compliments about the service they provided. These included, "Your staff team have provided excellent care...the team has really pulled out the stops to give [name] the best possible care and quality of life" and "I just can't express enough how impressed I was...I don't think I have ever witnessed an environment where so much thought and consideration has been given to the residents."

## Is the service well-led?

### Our findings

At our last comprehensive inspection, we found the service was well-led and awarded a rating of Good. At this inspection, we found the service continued to be well-led.

The registered manager was supported by an area manager and senior staff in running the service. The area manager, a registered manager from a different service and senior staff assisted us throughout our inspection as the registered manager was away from work. The team worked together to find the information we required and were open and honest with us throughout. We found the documentation in relation to the running of the service and the people who used the service were in good order.

The registered manager was highly commended by the staff team, carers and people who used the service without exception. One staff member commented, "The team are brilliant and the manager is brilliant." Another staff member stated, "I think [the registered manager] is very supportive. They are very focused on making sure we get the right training and support." All the staff we spoke with described feeling supported within their roles. Carers noted their confidence that any issues would be addressed by the management team and one person described the manager as, "The best I have ever come across." They described the changes to the environment and noted this was because the registered manager was always thinking of ways the service can improve and develop.

The provider used a survey to collect feedback about the service. This demonstrated a positive commitment to listen and learn from people's experiences to improve the service.

The provider had an audit system in place to monitor the quality and safety of the service. This included audits completed by the registered manager, managers from other services and the area manager. We spoke with the area manager about maintaining clear records to evidence how people's one to one hours were used to ensure these enabled people to spend their time as they chose. The area manager explained how they were in the process of further developing their auditing system to include more information about any issues which were identified and the timescales within which these would be resolved.

Regular team meetings provided an opportunity to share information and to discuss the running of the service. A staff member advised staff were encouraged to add items to the agenda for discussion. We saw how team meetings were used to reflect and learn following incidents, to deliver refresher training and improve knowledge and practice in particular areas, which included fire safety and infection prevention and control.