

Home Group Limited

Stonham Albion House

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

Stonham Albion House provides domiciliary care services to four customers with learning disabilities who live in individual flats within the town of Driffield. 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.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and on going monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Systems and processes were in place to support people to stay safe. Staff understood actions to take to reduce risks and promote positive risk taking for customers to live independently. Customers and staff were confident if they had any concerns for customer's safety, the registered manager would support them fully. Staff had received safeguarding training and knew how to recognise and report abuse.

Customers 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. Detailed care plans and risk assessments were completed which explained to staff how customers wished to receive their care and support. Staff were trained and understood the principles of the Mental Capacity Act. Staff were kind and caring. The focus of the service was on the customers. Staff's understanding of what was important to the customers was evident throughout the inspection and customers were supported to live independently and fully supported with decision making. Staff showed real empathy for the people they cared for.

Information was available to staff to support customer's health care needs. Care records guided staff. Advice and guidance was obtained from health care professionals to fully achieve person- centred support. Activities that were meaningful to the customers were planned and staff encouraged customer feedback. A complaints procedure was in place and customers knew who to speak to if they had any concerns.

The registered manager and staff had a clear vision of empowering customers with learning disabilities. Customers told us they liked living at Stonham Albion House and said that moving there, was the best thing that had happened to them. Staff enjoyed working there and said they received good support from the registered manager and the client service manager.

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

Stonham Albion House

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.'

A comprehensive inspection took place on 21 May 2018. We gave the provider four days' notice of the inspection visit, because the location provides a domiciliary care service to a small care home for adults with learning disability, who are often out during the day. We needed to be sure that they would be in.

The inspection team consisted of one inspector and an inspection manager.

Before the inspection we reviewed information we held about the provider, including the provider's information return (PIR). 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 although this is not detailed on the exemplar report. We looked at statutory notifications that the provider had sent in to the Care Quality Commission [CQC]. A notification is information about important events which the service is required to send us by law. We also contacted the local authorities that commission services from the provider to gain their views about the service. We used this information to help inform our inspection planning.

During the inspection the registered manager was available throughout the day. The registered manager informed us that the people who live within Stonham Albion House like to be referred to as 'customers', so we have followed this theme throughout this report.

We spoke with all four customers within the service, four members of staff and a health care professional.

We checked two care records, two medication records, and one staff record. We reviewed complaints and compliments documents, quality audits, policies and procedures, staff rotas, staff training records and health and safety records related to the management of the service.

Is the service safe?

Our findings

Customers at Stonham Albion House told us they felt safe, comments included, "I definitely feel safe. The staff are wonderful", "I feel safe here" and "It's secure here, I feel safe on a night."

Customers were encouraged to take positive risks and given information about how to keep themselves safe. We saw information displayed for customers with locations in Driffield that were part of Humberside Police Safe Spaces scheme, where vulnerable people can go, if they were afraid or at risk. This enabled customers to go to a safe space and be supported to return safely to the home when out alone.

Staff and customers were aware of systems and processes for keeping people safe and both staff and customers received training in safeguarding. A safeguarding policy was in place and all safeguarding incidents were recorded. Staff told us, "We have systems in place for keeping customers safe" and "I would report any risks or concerns I had straight away." Staff also told us they were confident the registered manager would take action if they raised concerns and would be supportive throughout.

Staff recruitment records showed that company policies and procedures were followed. All required recruitment checks were completed. Discussions with the registered manager informed us that 24 hour care was available and in addition, customers were allocated their personal time with staff at requested times. This meant that there was a member of staff available at all times if a customer required them. We looked at staff rotas and this showed the service continued to provide enough staff to meet people's needs and keep them safe.

There had been previous issues raised by one customer and relative regarding the use of agency staff. Lessons were learnt and customers were now involved in the interview process for staff. Resulting in agency staff been used less often and meaningful relationships been formed between staff and customers.

We saw medications were managed and administered safely. Staff administering medication had been trained and competencies were checked. Medicines risk assessments were in place for each person and detailed whether the person was able to manage their medicines independently or if they required support.

Staff had received training to ensure customers were protected from the risk of infection and had understanding of the use of personal protective equipment, [PPE]. The environment was clean and tidy. Systems were in place to ensure details of any accidents or incidents were recorded and reported to the registered manager. The registered manager looked into any accidents or incidents and produced clear action plans. Customers had a personal emergency and evacuation plan in place, which detailed their needs and behaviours. The environment, equipment and utilities had been checked to ensure everything remained safe to use.

Is the service effective?

Our findings

Customers were cared for by staff that were appropriately trained to understand their needs. Staff and the registered manager knew customers well. A health professional told us, "I have worked with [customer's name] for a long time and at the moment things are very good. This is down to the staff, working together and having the right level of support in place to maintain independence in a structured positive way." Comments from health professionals included, "The service is very willing to work with us and keep regular contact."

Pre assessments were completed and from this detailed care plans were developed before customers entered the service. Adaptations to the flats were completed before admission, ensuring the customer received the correct support and facilities for their needs. Customer's flats were decorated to their individual preferences and personalised with family photographs and home furnishings of their choice.

The Mental Capacity Act 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 when this is in their best interests and legally authorised under the MCA. The application procedures for this in community settings are called the Deprivation of Liberty Safeguards (DoLS) and are authorised by the Court of Protection. No DoLs applications had been made for people at this service.

Staff had completed the care certificate and were well motivated and experienced to deliver effective care and support. The care certificate is a nationally recognised set of standards that gives staff an introduction to their roles and responsibilities within a care setting. Records showed staff accessed training on a regular basis in line with the provider's policies. Regular supervision meetings and competency checks were carried out to monitor working practice. Staff were continuously developing their skills to keep up to date with best practice for the customers they cared for.

Customers were supported to maintain a balanced diet. One customer within the service told us, "I do all my own cooking and I like to go shopping for what I need." Customers were encouraged to play an active role in developing menus and the choices were varied and reflected their preferences. We saw information relating to menus and shopping lists displayed in customer's own flats.

We saw evidence of innovative technology which was used to support one customer with sensory impairment. This was in the form of an application on their tablet computer that allowed their health needs and medication to be recorded. Voice recognition was used by the customer, which translated to text information for staff and health professionals to use. This made communication for the customer easier and more accessible.

Customer's records showed us health advice was sought in a timely manner. They had access to a variety of healthcare services, including GP's, dentists, chiropodists and opticians. Regular meetings with the

community learning disability nurse provided extra support to staff to embed positive behaviour. People's preferences were respected as one person preferred to visit the GP alone. Information about customers health needs, behaviours and preferences was available for them to take to their appointments.

The service understood the needs of different people and groups of people, and delivered care and support in a way that met these needs and promoted equality. Staff undertook training in working with lesbian, gay, bisexual and transgender and along with heterosexuals [LGBT] groups to increase their understanding of the cultures and equality and how to apply this when offering support to customers.

Is the service caring?

Our findings

Customers were treated with kindness, respect and compassion. They told us they had good relationships with the staff and they felt well looked after. Comments from customers included, "Staff are wonderful, and they listen to me, respect me and are very caring", "My care worker is good; we get on so well, the time goes by so fast", "It's awesome here; best thing that has happened to me and the staff are very caring" and "I like it here, I like it a lot. I like all the staff."

We observed staff being kind and polite towards customers. Customers told us they were supported to make their own choices and these were respected. One told us, "I do lots of cooking and cleaning and I do it when I want to. They support me if I need it." Another person told us, "I manage my own money and I can go away on holiday on my own." Staff demonstrated a real passion when talking about the difference they had made to customers. One member of staff said "[Name of customer], he inspires me." They added, "Knowing that they [customers] feel empowered, is what I love about this job, it matters."

Staff had implemented various methods of engaging with customers, this included use of a mood chart. This supported customers to express their feelings in a non-vocal way. With the use of pictures and written words, people could express clearly how they were feeling even if they did not wish to talk about it. Staff told us, this supported customers to manage their feelings in a simplified language which helped them to find ways of coping and to promote wellbeing.

Staffs were skilled and understood people's complex communication needs. Customers wrote in their own care plans. This was known as the customer handprint. We saw entries made by customers expressing their wishes in relation to living independently. Written conversations with detailed what goals they wished to achieve, the support they would need and identified any risks that may occur. Further written conversations between staff and customers detailed how they had felt once they had achieved their goal, how it had made them feel. This showed staff understood what was important to them. Care plans were kept in the customer's room to maintain confidentiality.

Customers were fully involved in the overall running of the service and had weekly house meetings which they led, to discuss any issues and to go through the company policies. Staff contributed to these meetings by providing information about events and services available within the local community.

Customers were supported to maintain personal relationships. They told us, "I go home every weekend to spend time with my family," "I like my friend to come and visit. I can also have my girlfriend to stay" and "I like going to the day centre to see my friends." Staff ensured customers had privacy at all times. All customers had their own key to their flats and staff told us they would always knock before going in. One member of staff said, "If they don't answer when I knock, I understand they want time to themselves."

Staff in all roles were highly motivated and offered care and support that was compassionate and kind. Staff cared for individuals and each other in a way that promoted independence and decision making, and staff demonstrated a real empathy for the customers. Staff had supported customers to create a small garden

area; we saw customers planting flowers that staff had brought in and working together to maintain it.

Community links were the customer's individual choice. One person worked within the community at various locations and had built positive, meaningful relationships which they spoke passionately about during the inspection.

There was also information displayed informing customers about how they could access support within the community if they wanted it. The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss were given information in a way they can understand. We found the service had met this standard.

Is the service responsive?

Our findings

Customers told us that they were fully involved with the planning of their care. Comments included, "I tell them what I need and when I need help" and "When I have my personal allowance time with staff, I decide what to do and they are great." Personal allowance time is one on one support time, which the customer chooses.

The focus of this service was on making customer's quality of life as positive as possible. The registered manager and staff engaged fully in providing personalised responsive care for all customers, tailored to their individual needs.

Commitment from staff to support customers with protected characteristics was proactive and effective. Resources such as DVD's were readily available to customers to explore sexuality and support decision making regarding relationships. Staff completed training in order to work with Lesbian, gay, bisexual, transgender [LGBT] customers to increase their understanding of their culture. Staff supported customers to attend LGBT events and these were celebrated in and outside the service. Customers were involved in painting a pride flag to display within the home and customers attended the Hull pride event. Pride parades are events celebrating LGBT culture and pride.

Care plans and risk assessments detailed how people had been supported to identify and achieve personal goals. The registered manager had completed training with the British Institute for Learning Disabilities [BILD]. They had developed tools to inform best practice and develop the skills and culture necessary to understand people's needs and improve their quality of life. We saw positive behaviour support plans in place, which were very detailed to enable staff to give the correct level of support to customers to maintain their independence and wellbeing. Reduced episodes of negative behaviour were clearly noted within one support plan, along with methods used. This showed us the service was managing behaviour that challenged the service and customers were being supported as requested.

Customer's individual needs were achieved through activities that were meaningful to them and what they were passionate about. Activities were planned by the customers, this included group activities and individual ones. Customers discussed with staff at weekly meetings what they would like to do and staff actively supported them to meet their requests. We saw customers going out to the gym and to coffee shops, on holiday and attending events. Customers were able to go alone or with a staff member if they preferred.

Complaints and compliments were responded to and recorded with clear actions. Policies had been discussed with the customers and there was a good focus on gathering feedback. This included feedback forms, questionnaires and 'you said, we did' documentation.

Discussions with the registered manager around how end of life care was supported identified an area that had not been explored with the customers. Following the inspection, the registered manager sent a planning tool developed with the customers, called 'planning for the future.' This tool was designed to

support customers who expressed a need or desire to make end of life plans and to ensure opportunities were available to plan for unexpected illnesses or death.

Is the service well-led?

Our findings

At the time of the inspection there was a registered manager in place. 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.

The provider, the registered manager and staff within the service had a clear vision of an inclusive service, where everyone's contribution and voice was heard. This included strong values of partnership working, respect and empowerment. The registered manager and the staff provided a service that was impact and outcome focused to ensure quality of life, inclusion and positive outcomes for people. For example, we saw detailed documentation of daily routines which described how the individual's day had impacted upon wellbeing. Where there had been negative impact, actions were put in place to promote positive outcomes.

The registered manager had understanding of their legal responsibilities in relation to registration. For example, the practice model embedded within the service, aligned with 'Building the right support'. This is a national plan which gives a clear framework to develop community services for people with learning disabilities and/ or autism who display behaviour that challenges, including those with a mental health conditions. The service were aware of what incidents they had a responsibility to notify the Care Quality Commission (CQC) about and records showed they had done so accordingly.

The registered manager ensured best practice by attending provider national working groups. This included a CQC panel where registered managers met at provider regional meetings, to analyse quality assurance and identify lessons learnt. We saw comments from the registered manager that said, 'Through the CQC panel I can learn from major incidents, investigations and serious case reviews at other services. This enables me to be part of the lessons learned process on incidents. It enables me to be preventative and put in place recommendations and actions before they may occur at Stonham Albion.'

Staff told us they were proud to work at the service and loved their jobs. Comments included, "I love my job, I get a lot of support and everyone cares for you" and "It's a really good job to be in; the management are really supportive and have gone above and beyond for me working here."

The provider held annual 'Home star' awards for staff. People and staff can nominate staff to celebrate their contribution of great work within the home group company.

Regular meetings took place with the registered manager, staff and customers within the service to discuss any issues and talk about anything they would like to do in future months. The registered manager also managed another home and in her absence there was a competent client service manager, who was responsible for the day to day running. All staff had a positive, enthusiastic attitude and were aware of what was expected of them in their role.

Quality assurance was completed on a regular basis by the registered manager and the client service manager to ensure records were completed correctly. Care review meetings were held with people to ensure

care and support was up to date, and in line with people wishes and values. Feedback was sought from staff, people, relatives and visitor and this was used to improve the service.