

Autism Care (North West) Limited

The Meadows

Inspection report

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Ratings

| Overall rating for this service | Inspected but not rated |
|---------------------------------|--------------------------------|
| Is the service safe? | Inspected but not rated |
| Is the service effective? | Inspected but not rated |
| Is the service caring? | Inspected but not rated |
| Is the service responsive? | Inspected but not rated |
| Is the service well-led? | Inspected but not rated |

Summary of findings

Overall summary

We carried out this announced inspection on 11 November 2016. We last inspected this service in August 2013. At that inspection we found that the provider was meeting all of the regulations that we assessed.

However the model of care since that last inspection under our old methodology has changed. In January 2016, The Meadows was redesigned and refurbished to provide four self-contained flats to give people a high standard of accommodation and to support them to gain greater independence. When we inspected in November 2016 there was only one person living in the home. Three other people were due to move into the home in early 2017. We have therefore judged that it is too early to give a quality rating for the home, although we saw that the person who was living there was safe and well cared for. We will provide a quality rating at our next comprehensive inspection.

The Meadows provides accommodation and personal care for up to five adults who have a learning disability and/or a physical disability. The home is a two storey building arranged as four flats. All of the flats have a bathroom and sitting, kitchen and dining areas. Three of the flats have one bedroom and one flat has two bedrooms. This could be used by two people who wished to share a flat or by a person who required a staff member to stay in their flat during the night. There is also a kitchen where staff could prepare or support people to prepare meals, a laundry room and an office for staff to use.

There was a registered manager employed in the home. 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 person living in the home told us that they liked the staff and felt safe living at The Meadows. We saw that the person was comfortable around the staff and the registered manager and looked to them for reassurance when they felt anxious.

There were enough staff to provide the support the individual required. The staff were kind, friendly and respectful. They gave the person living in the home the time and support they needed to make choices about their life and support. Care was planned and provided to meet the individual's needs. They followed a range of activities they enjoyed and were supported to maintain relationships that were important to them.

The atmosphere in the home was relaxed, homely and inclusive. The person was placed at the centre of their care and included in all decisions about their support. We observed the staff and registered manager included the person at all times. The individual enjoyed chatting and laughing with the staff and registered manager.

Good systems were in place to ensure the safety of people who used the service. New staff were checked to ensure they were suitable to work in a care home. Checks were also carried out on the premises and service

to ensure the safety of people who used it.

Staff were well trained and felt supported in their roles. The staff knew the person who lived in the home well and provided their support as they wished.

The focus of the service was on promoting people's rights and independence. The registered manager was knowledgeable about the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards, (DoLS).

The registered manager and registered provider maintained oversight of the quality and safety of the service. Where areas were identified that could be further improved appropriate actions were planned and taken.

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.

Staffing levels were planned to ensure there were enough staff to provide people's support. The staff understood how to identify and report abuse.

Medicines were stored and handled safely.

New staff were checked to make sure they were suitable to work in a care service.

Inspected but not rated

Is the service effective?

The service was effective.

Staff had received appropriate training to give them the skills and knowledge to provide a high standard of care.

The premises were designed to give people opportunities to gain greater independence.

The registered manager was knowledgeable about the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards.

Inspected but not rated

Is the service caring?

The service was caring.

The staff were kind, friendly and respectful. They gave the person living in the home the time and support they needed to meet their needs and to support their wellbeing.

The service focused on giving people opportunities to gain greater independence.

Inspected but not rated

Is the service responsive?

The service was responsive.

Care was planned and provided to meet the individual's needs. They followed a range of activities they enjoyed and were supported to maintain relationships that were important to

Inspected but not rated

them.

The registered provider had a procedure for receiving and managing complaints about the service.

Is the service well-led?

The service was well-led.

The registered manager and registered provider maintained good oversight of the home and monitored the quality of the service to ensure people received safe care that met their needs.

Staff felt well supported and able to provide a high quality of care.

The person who lived in the home was placed at the centre of their care. The atmosphere in the home was respectful, friendly and inclusive.

Inspected but not rated

The Meadows

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 11 November 2016. We gave the registered manager 24 hours' notice of our visit to the service because this was a small care home for younger adults who can often be out during the day and we needed to be sure that someone would be in.

The inspection was carried out by one adult social care inspector.

During our inspection we spoke with the person who was living at The Meadows, the registered manager and with the two care staff who were on duty. We observed how the staff team interacted with the person who was living in the home. We also looked at the care records for the person living in the home and at records relating to staff recruitment, training and the management of the service.

We reviewed the information we held about the service before we visited the home. We also contacted the local social work and commissioning teams to obtain their views of the service.

We would note that although this service has been inspected previously, the environment and model of care had change considerably since the last inspection under our old methodology.

Is the service safe?

Our findings

During our inspection we spent time with the person who lived in the home and observed how the staff interacted with them. The person who lived in the home told us that they liked the home and the staff who worked there. They said they felt safe living at The Meadows.

There were enough staff employed to support the individual. There were two members of the care team on duty in the home. The registered manager also managed another service located next to The Meadows. They were available to support the staff in the home and joined the inspection at various times during the day.

We saw that the person who lived at the home was confident and comfortable around the registered manager and the staff on duty. The staff on duty told us they were confident the person was safe living in the home. They told us they had received training to ensure they had the skills and knowledge to provide the person's support in a safe way.

The staff understood how to identify and report abuse and told us they would be confident to raise any concerns with the registered manager or with the local safeguarding authority.

The staff we spoke with and the registered manager told us that, when new people moved into the home, each person would be supported by their own staff team to ensure they received the support they needed at all times.

We saw that medicines were stored and handled safely in the home. At the time of our inspection facilities had been provided for people's medicines to be stored in one central location. This was locked to prevent medicines from being misused and to protect the person living in the home. We were told that, as more people moved into the home, consideration would be given to each person having a lockable area in their own accommodation where their medicines could be stored. This is a more person centred approach and is in line with good practice. We saw that records of medicines that had been administered had been completed. This helped staff to know when a person had been given their medicines and helped to prevent mistakes with administration of medicines.

The premises had been redesigned in early 2016. We saw that all areas were well maintained and good systems were in place to check the premises and equipment were maintained and safe to use.

We looked at the records held in the home. We saw that hazards to the individual's safety had been identified and appropriate actions had been taken to reduce and manage risks. The risk assessments were used to support the person to engage in a range of activities that they enjoyed while maintaining their safety. This was confirmed by the social care professionals that we contacted. One told us that they had found people were "well cared for, prompting independence, choice and control whilst balancing risks effectively".

Safe systems had been used when new staff were employed. New staff had provided evidence of their good character and conduct in previous employment. They had also been checked against records held by the Disclosure and Barring Service to ensure that they were suitable to be employed in a care service. The registered manager had systems in place to ensure any new staff were thoroughly checked.

Is the service effective?

Our findings

The person who lived at the home told us they liked the staff who worked there and said, "They [care staff] know what they're doing". We saw that the staff were knowledgeable about how to support the individual and how they wanted their care to be provided.

The staff we spoke with told us they had completed training before working in the home. They told us the training provided had given them the skills and knowledge to support the individual who lived there. One of the staff told us the registered provider was "excellent at providing training".

Training records we looked at showed staff had completed training including safe moving and handling, safe handling of medication and training specific to supporting the person who lived in the home. The registered manager had good systems to identify when training needed to be repeated to ensure the staff maintained up to date knowledge and skills.

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 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.

The registered manager and care staff on duty were knowledgeable about the MCA and how to respect people's rights. The registered manager was also aware of her responsibility to apply for a DoLS if a person had restrictions in place to maintain their safety.

We saw that the staff in the home respected the individual's rights and gave them choices about their daily life. The person was given the support and time they needed to make decisions about their life and the staff respected the choices they made. The person had signed their own care records to show that their care had been discussed with them and they had agreed to their support. Throughout our inspection the person made choices about how they spent their time and if they wanted to be with the staff or to spend time on their own in their flat.

During our inspection we saw that the staff on duty provided the person with drinks and food as they wished. The person who lived in the home told us that the staff member who was preparing the midday meal was "good at cooking". We saw the individual was supported to eat and drink enough to maintain their health.

All the staff employed had completed training in how to handle food safely. South Ribble Borough Council

had assessed the food hygiene rating for the home as five stars, very good. This was the highest award that the council could give. People could be confident food was stored and prepared safely.

The care records we looked at showed that the individual who lived at The Meadows was supported to access appropriate health care services.

Is the service caring?

Our findings

The person who lived in the home told us that the staff who worked there were "nice". We asked if the staff treated them in a kind and caring way and they told us the staff did. Throughout our inspection we saw the individual was relaxed and comfortable around the staff working in the home and around the registered manager. The person and staff shared jokes and there was a happy and inclusive atmosphere in the home.

The staff working in the home knew the individual who lived there very well. We saw that they knew how to identify if the individual was feeling anxious and how to support them to reduce their anxiety by following routines that supported their wellbeing. The individual looked to the staff for reassurance when they were anxious and we saw the staff provided support very promptly.

At all times the staff spoke to the individual in a kind and friendly way. They treated them with respect and supported them to maintain their privacy. The staff knocked on the door to the person's flat and only entered with their agreement. When the person wished to spend time on their own in their flat, the staff respected their wishes. The staff told us that only staff members of the same gender as the individual supported them in their own flat to ensure their privacy and dignity were maintained. This was confirmed by the care records we looked at.

Throughout our inspection the staff gave the person information and choices in a way they could understand. They gave the person time and information to make choices about how they wanted to spend their time. The person was asked what they wanted to do and if they wanted staff to be with them or to be on their own.

The staff consistently referred to the individual who lived in the home in a respectful and positive manner. They knew the tasks that the person could carry out themselves and we saw that support was provided in a manner that promoted the person's independence.

The registered manager was knowledgeable about local advocacy services that could support people to express their wishes or to make major decisions about their lives. An advocate is a person who is independent of the service and who is trained to help people to make and to express their wishes.

Is the service responsive?

Our findings

The person who lived in the home told us that the staff asked them how they wanted to be supported and how they wanted to spend their time. We saw that the staff knew the person well and gave them choices about their support in an appropriate manner.

There were detailed care records giving information for staff about the person, their likes, preferences and the support they required. The care records also held information about the tasks the person could carry out themselves and how staff could support them to greater independence. The care records gave advice for all aspects of the person's support. The staff told us the care records gave them the information they needed to provide a good standard of support to the individual.

We saw that the person had signed their care records to show they had agreed to them. Throughout our inspection we saw that the support provided was responsive to the individual's wishes. They chose how they spent their time and the staff supported them to follow activities of their choice.

From speaking and spending time with the person who lived in the home, we saw that the care records accurately reflected the support the person required and held good information about their preferences regarding their support.

We asked the individual about the activities they liked to follow. They told us they followed a range of activities that they enjoyed in the home and in the local community. The staff and registered manager told us that some activities were planned, as they needed to take place at specific times, such as swimming but other activities could be arranged in response to the person's wishes at the time. Activities were planned and provided in response to the preferences of the individual.

The person who lived in the home told us they were supported to see their family and friends as they wished. They were supported to maintain relationships that were important to them.

The registered provider had a procedure for receiving and responding to any complaints. The registered manager told us that they had not received any complaints about how the service was provided and we had not been informed about any complaints about the service. Information about how people who used the service and their families could raise a concern was available on the provider's website. This meant it was available for people if they did not wish to make a complaint directly to the registered manager.

The staff we spoke with knew that people who used the service could require support to make a formal complaint. They knew how to support people to make a complaint about their care if someone needed this.

Is the service well-led?

Our findings

The person who lived in the home told us it was "a nice place to live". They said they knew the registered manager and we saw they were comfortable and relaxed around them.

The staff we spoke with told us they felt very well supported by the registered manager of the home. One staff member told us the registered manager was "an excellent role model". They told us that, due to the support they received, they were very happy working in the home and said the registered manager had created "a good atmosphere".

The staff told us the registered manager was committed to providing a good service that respected people who lived in the home and the staff employed there. One staff member told us, "There's a good balance, [the registered manager] is there for people who live here and also for the staff". They told us that they felt staff morale was good because the staff felt well supported and able to provide a high quality of care.

All of the staff we spoke with said they would be confident to speak to the registered manager if they had any concerns about the actions or behaviour of another member of staff. The registered provider also had a telephone helpline that staff could call in confidence to report any concerns about another member of staff.

Throughout our inspection we saw that the person who lived at the home was placed at the centre of all decisions around their support. The staff on duty consistently asked for the person's views and gave them support to express their wishes. The atmosphere was homely, happy and relaxed. The staff and registered manager had established positive relationships with the individual and treated them in a respectful and kind way.

The registered manager and registered provider carried out checks in the home to ensure the quality and safety of the service provided. The registered manager checked how medicines had been managed and recorded and that money held on behalf of the individual had been held safely. The registered provider also carried out a thorough audit of the service to assess the quality. Where areas were found that could be improved the registered manager had developed a plan on how to further improve the quality of the service. The registered provider and registered manager maintained oversight of the quality of the service and took action for the continuous development of the home.

There were senior staff employed who worked with support staff in the home. The senior staff provided ongoing support and guidance and there was always an identified senior person responsible for overseeing the service. There were appropriate arrangements in place for managing the service when the registered manager was not in the home.

Providers of health and social care services are required to inform the Care Quality Commission, (the CQC), of important events that happen in their services. The registered manager of the service had informed CQC of significant events as required. This meant that we could check appropriate action had been taken.