

Tudor Views Limited

Hamilton Court

Inspection report

2 Hinstock Road
Handsworth Wood
Birmingham
West Midlands
B20 2ET

Tel: 01215154955

Date of inspection visit:
12 October 2018

Date of publication:
15 January 2019

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

This inspection took place on 12 October 2018 and was unannounced. We last inspected this service in October 2015 where the service was given an overall rating of good. At this latest inspection the service remained 'Good'

Hamilton Court is a care home which is registered to provide care to up to 13 people. People in care homes receive accommodation and personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. The home specialises in the care of people with a learning disability and mental health support needs. On the day of our inspection there were 13 people living at Hamilton Court.

The service had a registered manager who was present during our inspection. 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 registered manager understood their responsibilities about safeguarding and staff had received safeguarding training. The provider had effective procedures in place for managing the maintenance of the premises and appropriate health and safety checks were carried out.

Staff understood people who used the service, their relatives and the staff did not raise any concerns about staffing levels. The registered manager showed us a staffing rota and told us that staffing levels were arranged according to the needs of the people using the service.

We found that there were appropriate arrangements in place for the safe management, administration and storage of medicines. Records showed that managers carried out checks to make sure people had taken their medicines. Staff who administered medicines had received training in this.

People had their risks identified and detailed care plans to mitigate these risks. People were kept safe as there was sufficient staff to respond to their needs and keep them safe. People received their medicines as required. People were protected as appropriate checks were completed on staff before they commenced work.

People's consent was sought by staff where ever possible, and all staff understood they should gain people's consent where possible. Where people were deprived of their liberty for reasons of safety this was agreed with the local authority so that the least restrictive options were used.

Staff treated people with dignity and respect and helped to maintain people's independence. People were given choices by staff to participate in activities. People who used the service had access to food and drinks and were supported to have food they enjoyed.

People, their relatives and health care professionals had been involved in the planning for their care needs. Care plans and risk assessments provided clear information and guidance for staff on how to support people to meet their needs.

People and relatives had confidence that they or their loved ones would receive a good standard of care. The provider had systems to allow them to monitor and improve the service as well as ensure potential risks were well managed. People's views were sought by the provider and these were acted upon. Most staff felt well supported by the management team. The provider understood their legal responsibilities and how to maintain a current knowledge of any changes in the law or social care.

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 REMAINS GOOD. | Good ● |
| Is the service effective? THE SERVICE REMAINS GOOD. | Good ● |
| Is the service caring? THE SERVICE REMAINS GOOD. | Good ● |
| Is the service responsive? THE SERVICE REMAINS GOOD. | Good ● |
| Is the service well-led? THE SERVICE REMAINS GOOD. | Good ● |

Hamilton Court

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 12 October 2018 and was unannounced. The inspection team comprised of one lead inspector and a second inspector.

We looked at the information we held about the service and provider. This included the notifications that the provider had sent to us about incidents at the service and information we had received from the public. Notifications are information the provider has to send us by law. During our inspection we met with people that lived at Hamilton Court. People living at the home have a learning disability and additional complex's needs. Some people had limited verbal communication and were not able to tell us if they liked living at the home. We observed how staff supported people throughout the inspection to help us understand their experience of living at the home.

We spoke with the manager, three care staff, and one relative. We looked at the care records of four people, the medicine management processes and records maintained by the home about recruitment, staffing, training and the quality of the service.

Is the service safe?

Our findings

Our last inspection in May 2015 we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

People told us they felt safe. One person told us, "Yes, I feel safe here". One person said, "I like it here, very happy". Another person nodded and raised their thumb when we asked them about the home. We observed that people were relaxed and comfortable.

We found robust recruitment procedures were in place. Staff told us they had completed references and checks before they started work at the home. We looked at the recruitment records of two members of staff. We found each file contained evidence that a DBS (a criminal record and barring list check) had been carried out, two employment references, health declarations and proof of identification.

There were sufficient numbers of staff on duty to keep people safe. People who used the service, their relatives and the staff did not raise any concerns about staffing levels. The registered manager showed us a staffing rota and told us that staffing levels were arranged according to the needs of the people using the service. The registered manager told us, "If extra support is needed for people to attend outside activities or health appointments then extra staff support is arranged"

Staff on duty were knowledgeable about types of abuse and had received training in how to protect people from abuse. Staff could describe the correct actions to take in response to abuse being reported or suspected and whistleblowing concerns.

People had risk assessments in place relating to, for example, accessing the community. A staff member told us, "I take three residents to deaf club once a week. I'm their key worker so I know them very well. I know if they are having a bad day and have techniques to reassure them and calm them down". The provider had environmental risk assessments in place relating to, for example, the building, care practice and activities which contained detailed information on particular hazards and how to manage risks.

Appropriate health and safety checks were carried out and records for that showed equipment and premises was safe, for example portable appliance testing, gas safety and electrical installation were all up to date.

The provider used aids and adaptations to ensure people's safety, that took account of the reasonable adjustments required by the Equality Act 2010. For example, equipment was in place to alert people with hearing loss that the fire alarm had been activated. Accidents and incidents were recorded and regularly reviewed by the registered manager. The provider's emergency continuity plan outlined the actions to be taken in the event of a range of emergencies. People had Personal Emergency Evacuation Plans (PEEPS), a fire risk assessment was in place and regular fire drills were undertaken.

There is an infection control audit in place and all staff have been trained in infection and control with a staff

infection control lead in place. The home was clean and suitable for the people who used the service.

The provider had effective procedures in place for managing of the premises. Health and safety checks were carried out. Due to planned works, where contractors were fitting a more suitable shower for people, there were potential risks present. These risks were assessed and steps taken to ensure people were safe. There was a risk register in place to manage any issues that arose, so they could be reported to the provider for action. The registered manager conducted a weekly 'walk around' and records any issues that are identified and there is a maintenance man to attend in place.

We found that there were appropriate arrangements in place for the safe management, administration and storage of medicines. Records showed that managers carried out checks to make sure people had taken their medicines. The supplying pharmacist had completed a recent audit at the home. The evidenced that people were receiving their medicines as prescribed by health care professionals.

Is the service effective?

Our findings

At our last inspection report in May 2015 we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

We found assessments of people's needs were in place and relatives we spoke with confirmed people were involved in these assessments. Staff told us how they sought information about people's needs, choices and any reasonable adjustments that may be needed due to any personal characteristics protected by law, for example age, gender, race, sexuality and disability.

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 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures 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 had the appropriate legal authority and were being met. We found the Provider working within the principles of the MCA and adhering to conditions on authorisations to deprive a person of their liberty. The registered manager had a good understanding of their legal responsibilities with regard to the MCA and DoLS. Staff told us they had received training in MCA and DoLS and demonstrated adequate knowledge. Consent to care and treatment was documented in people's care records.

Staff were knowledgeable about people's special dietary needs and preferences. People's care plans contained information on people's preferences and any dietary needs, providing guidance for staff to support the person. During our visit we observed people supported to help prepare food and make drinks and snacks. One person told us "The food is very good". A relative told us "The food is great, the chef cooks whatever they want".

Staff members we spoke to told us they had completed an induction and were up to date with the training the provider had identified they needed as a minimum. Staff told us they received regular supervision and annual appraisals. Staff records we looked at confirmed that all staff members were receiving regular and annual appraisal. There was an employee and resident of the month scheme in place, this is decided by the staff and residents.

People had access to healthcare services and received ongoing healthcare support. Staff and care records contained evidence of visits to/from a range of health professionals including, opticians, dentists, GP's and mental health teams. We saw that the outcome of health appointments were recorded in detail so that any actions requested by healthcare professionals could be followed.

The building provided adequate space, and was suitable for the people who used the service. People have

been involved in the refurbishment of the home, for example, they had requested a shower be installed in one of the bathrooms, this was being fitted during our inspection. People had fed back their preference for their rooms to be decorated in their chosen colours and how furniture was to be laid out.

Is the service caring?

Our findings

Our last inspection report for Hamilton Court was published in May 2015 at which point we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

People who used the service were happy with the standard of care at Hamilton Court. One person told us, "I am happy with the care here". One relative said, "The staff treat people here very well. It's like one big family, there is always a caring atmosphere".

We observed staff engaging with people in meaningful conversations. People approached staff with issues they wanted to discuss and looked comfortable in the presence of staff. Staff were kind, caring and respected the privacy and dignity of people.

People told us they had been consulted about their care and support needs. The registered manager told us "People choose who they want to be their key worker. We believe this is important because we want them to feel like they have a key role in how their care is delivered" A relative we spoke to said, "There are regular reviews of care and I have been involved. They really make an effort to ensure our views are taken in account"

Staff had completed human rights, equality and diversity training, our observations confirmed staff treated people with respect and dignity. For example, we observed people having choice during meal times. One staff member told us, "People have choice about the care they receive, this is their home so they should feel comfortable and have a voice". A relative told us, "The staff here respect people's privacy and treat them with dignity".

Staff supported people to maintain their independence. People had a good rapport with staff. One person said, "The staff are great, very caring".

People were encouraged and supported to maintain their relationships with their friends and relatives. One relative said, "The manager and staff are lovely, it's like my second home. It's like one big family"

The registered manager told us some of the people who used the service had independent advocates. Advocacy information was made available to people who used the service and people were directed to advocacy services if required. Advocacy services help people to access information and services, be involved in decisions about their lives, explore choices and options and promote their rights and responsibilities.

People's care records were kept securely ensuring only care and management staff had access to them. This ensured the confidentiality of people's personal information.

Staff supported people to visit culturally inspired events locally and were involved in the local community as much as possible. For example, during our visit several people were supported to visit the local Mosque, and we saw they had clearly enjoyed the visit.

Is the service responsive?

Our findings

Our last inspection report for Hamilton Court was published in May 2015 at which point we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

A person told us, "Staff always listen to what I have to say". Another person said, "We have lots of fun".

Staff were knowledgeable about the people they supported. They were aware people's histories, likes and dislikes, interests, and their health and support needs. People had all been assigned a key worker. A key worker is a member of staff that works with and in agreement with the person they are assigned to. The key worker has a responsibility to ensure that the person they work with has maximum control over aspects of their life. One staff member said, "I've worked with some of the residents for many years. As a result, I know them very well and know how best to meet their needs".

We observed people who lived at the service receiving care and support that met their needs. We looked at two care files and found these were organised and contained assessments for physical, nutritional and mental health needs.

The manager and staff demonstrated compliance with the Accessible Information Standards (AIS) and how this should be implemented. The Accessible Information Standard is a law which aims to make sure people with a disability or sensory loss are given information they can understand, and the communication support they need. For example, information about the provider and services in easy read format.

People were encouraged to participate in activities run at the home, we saw people watching television, listening to music and playing games with staff members. We saw examples of where equipment was provided specifically to meet different people's needs. For example, we saw there were different sensory equipment to support different individuals well-being.

People had health action plans and hospital passports in place which contained information about their health needs. These would accompany the person should hospital treatment be required.

People told us they were encouraged to give their views and raise concerns or complaints. The provider's complaints policy was on display. There were no open complaints at the time of our inspection. The registered manager confirmed any concerns or complaints were taken seriously, investigated and responded to. People and their relatives told us they knew who they could go to with any concern or complaint and all felt that they would be listened to and that the concern would be addressed.

There is an easy read version of the complaint policy in place and this was clearly displayed in the entrance area. There were monthly resident's meetings, and surveys are conducted every 6 months alongside surveys for professional visitors to the home. There was also a feedback comments book situated in the main entrance area.

Is the service well-led?

Our findings

Our last inspection report for Hamilton Court was published in May 2015 at which point we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

People using the service told us they had positive relationships with the registered manager and staff members. We observed the registered manager and staff had good interactions with people, and examples of mutual respect and understanding.

The registered manager told us they felt supported in their role and they had an open-door policy. As a result, people who used the service, their relatives and other visitors could chat and discuss concerns at any time. People who used the service and their relatives spoke positively about the registered manager and the staff. They said that they were very approachable. They would have no concerns in speaking with them if they had any worries or concerns.

The registered manager had a good understanding of their role and responsibilities in relation to notifying the relevant bodies about serious injuries and safeguarding concerns. The registered manager was also able to explain what their responsibilities were in respect of their duty of candour.

The registered manager has created an information sheet on protected characteristics which is informative and ensures staff have full information on discrimination.

The provider regularly sought the views of people who used the service and their relatives. The home had a positive culture that was person centred, open and inclusive. One relative told us, "Everyone is supported to have access to what is important to them, such as football, music, religious celebrations, whatever they want"

Staff were regularly consulted and kept up to date with information about the home the provider. Staff meetings were held monthly. The staff we spoke with felt supported in their role and felt they could report concerns. One member of staff told us, "We are a very good close team, we support each other. The registered manager is always approachable and I feel like I have a valued voice"

The law requires the provider to display the rating for the service as detailed in CQC reports and the provider was aware of this requirement. We saw the rating from our previous inspection on clear display in the home and on the provider's website.