

Mrs Jacqueline Miller

Malbary House

Inspection report

45 Carlton Street
Kettering
Northamptonshire
NN16 8ED

Tel: 01536481708

Date of inspection visit:
12 September 2017

Date of publication:
06 October 2017

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 September 2017 and was unannounced.

Malbary House provides support for up to six people with Learning Disabilities. At the time of the inspection there were five people living at the home. At the last inspection in August 2015, the service was rated Good. At this inspection we found that the service remained Good.

There was a registered manager in post. 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.

People continued to receive care that was safe. We saw that staff had been appropriately recruited in to the service and security checks had taken place. There were enough staff to provide care and support to people to meet their needs. People were consistently protected from the risk of harm and received their prescribed medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision, training and on-going professional development that they required to work effectively in their roles. People were supported to maintain good health and nutrition.

People told us their relationships with staff were positive and caring. We saw that staff treated people with respect, kindness and courtesy. People had detailed personalised plans of care in place to enable staff to provide consistent care and support in line with people's personal preferences.

People knew how to raise a concern or make a complaint and were confident that if they did, the management would respond to them appropriately. The provider had implemented effective systems to manage any complaints that they may receive.

The service had a positive ethos and an open and honest culture. The registered manager and deputy manager were present and visible within the home.

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.

Malbary 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.

This inspection took place on 12 September 2017 and was unannounced.

The inspection was carried out by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider returned the PIR and we took this into account when we made judgements in this report. We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. This included the local authority who commissioned services from the provider.

We spoke with three people who use the service, one staff member, the deputy manager and the registered manager. We reviewed three people's care records to ensure they were reflective of their needs; we also reviewed three staff files, and other documents relating to the management of the service.

Is the service safe?

Our findings

People told us they felt safe in the service. One person said, "Yes very safe here." All the people we spoke with thought that the service provided safe care for everyone.

Recruitment files we looked at showed that safe practices were used when new staff joined the service. This ensured that staff were suitable to be working within a care setting. All staff went through disclosure and barring service checks (DBS) and provided references from previous employment along with identification checks.

There were enough staff working at the service. The service was small, and had a dedicated staff team that provided the right amount of support for the needs of the people. Everyone we spoke with felt that there were enough staff at hand to support people during the day and night. We saw rotas which showed that the service was consistently staffed and no agency staff were used.

Risk assessments had been created to manage risks within people's lives, and we saw that staff were vigilant and aware of the care required to keep people safe. The provider had a clear safeguarding procedure and staff were knowledgeable about the steps to take if they were concerned about anyone's safety.

People told us they were happy with the support they received with their medication. One person said, "The staff help with my medication. I am happy with it." We looked at medication administration records (MAR) and saw that they were all accurately filled in. Medication was stored securely in a locked cabinet, and staff were trained in the administration of medication.

Is the service effective?

Our findings

Staff had a good knowledge and understanding of the needs of the people they were supporting. Staff received training to enable them to confidently and competently support people with a wide range of needs. The staff we spoke with explained the training on offer and told us that it was of good quality and improved working practice. We saw that staff were inducted in to the service with mandatory training sessions such as safeguarding, manual handling and fire safety, and on-going training was provided to both refresh knowledge and to gain new skills. The service put new staff members on to basic care qualification courses to ensure that the skills and knowledge required within a care setting were learnt.

All the staff were given supervisions with management on a regular basis to enable feedback and communication on their role and the service. We saw that appraisals also took place to review the progress of staff and set goals for the coming year.

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 Mental Capacity Act. The procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS). The registered manager was able to demonstrate they worked within the principles of the MCA and there was satisfactory documentation to support this.

People told us they were encouraged to make decisions about their care and their day to day routines and preferences. We observed during our inspection that people were offered choices about what they could do, and what they could eat or drink. We saw that people were free to do the things they wanted to do and had staff support them as required. One person was able to access the community independently, and we saw that staff encouraged this independence as well as making sure the person was safe and had the support in place that they needed.

People had the support they required to maintain a healthy and balanced diet. We saw that fresh food and snacks were available from the kitchen, and people told us they were happy with the food that was prepared for them. One person said, "The staff go shopping with me, I pick what I want. I am happy with the food I eat." We observed that people were offered various choices of food during the lunch period, and support with eating and drinking was given when needed.

People had the access to healthcare they needed. We saw that visits by health professionals had been documented within people's records, including visits from district nurses and doctors. During our inspection, staff were supporting a person to attend a scheduled doctor's appointment. Records were kept to support people's health and wellbeing, these included food and fluid intake, weight monitoring and turns charts as required.

Is the service caring?

Our findings

People were cared for in a warm and friendly manner, and staff treated people with compassion and respect. One person said, "Yes I like the staff, they are very kind." The registered manager said, "We have been caring for some of the people here for over twenty years, they are like our family."

During our inspection we saw that staff knew people very well, and interacted with them in a kind and friendly way. Staff took the time to communicate with people, ensuring they were understood, and enabled people to achieve what they wanted to. We could see that people were very comfortable around the staff, and considered the service their home.

People's choices in relation to their daily routines and activities were listened to and respected by staff. We saw that some people were out of bed and dressed, and others were getting up as and when they wanted to. People were supported to arrange activities of their choice if they wanted to. We saw that people had the freedom and support to complete any tasks and routines of their choosing. Staff regularly checked with people to see if they needed anything or required any support.

People were treated with dignity and respect. One person said, "Yes they respect my privacy, no problems." We observed that people's privacy was respected at all times, and staff knocked on doors before entering. During our inspection, one person had a visitor conducting a review with them, they were given a private space to conduct their meeting and the person had a friend support them as they requested.

Is the service responsive?

Our findings

Care plans showed that people had involvement with making specific decisions, and that their choices were clearly recorded for staff to follow. The registered manager told us that they would be involved in a pre-assessment of people's needs before providing care to them, and we saw that pre assessments had been completed within people's care files.

The care plans we looked at contained personalised information about people's specific likes, dislikes, personal history and preferences. This meant that staff were able to learn about people and the specific things they liked. People had been supported to create 'Life plan' folders, that they had decorated in their own preferences and styles. The plans gave staff a clear picture on the person, what they wanted out of life, and how they wanted to be cared for. All the care plans we looked at had been regularly updated.

People were able to take part in activities and socialise as they wished. One person told us they were able to go out whenever they wanted to, but often preferred to stay in. During our inspection we saw that one person had been out to see a friend, and brought them back in to the house for a visit, and to help with a meeting they had. We saw that the staff were friendly and welcoming to the visitor, and had an excellent rapport with them. The visitor said, "It's very nice here, we all get on with the staff."

People knew how to make a complaint if they needed and were confident that their concerns would be listened to and acted upon as required. One person said, "I have not had to make any complaints." We saw that the service had a complaints policy in place, and staff would regularly ask people for feedback and if there were any problems. We saw that no formal complaints had been made.

Is the service well-led?

Our findings

A registered manager was in post at the time of the inspection. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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 atmosphere within the service was friendly and positive, and there was an open culture. The staff we spoke with all felt the service was run like a family home, and the people living there were always put first. One staff member said, "Its lovely here, its run very well and I can't fault a thing. [Registered manager's name] is always here." All the residents we spoke with knew who the management were, and they were clearly comfortable in their presence. The registered manager had an excellent knowledge of all the people using the service, and had a passion to provide the best care possible for them. This enthusiasm was passed down to the staff who all understood the vision and values of the service.

Staff felt able to voice any concerns or issues and said they were listened to by management. We saw that team meetings were held which covered a range of subjects, and offered a forum for discussion and learning. We saw minutes of meetings held, and staff we spoke with confirmed they took place.

Quality assurance systems were in place to help drive improvements. The registered manager and the deputy manager had a good knowledge of all aspects of the service, and knew what areas needed updating and when. We saw that the deputy manager had been regularly updating staff files and client files, and medication records were checked regularly. Actions were created when any errors or faults were found.