

Precious Homes Support Limited

ABI Homes - Veryan Place

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

This inspection took place on 19 October 2017 and was unannounced.

Veryan place provides accommodation and personal care for up to 3 people with autism and learning disabilities. At the last inspection in September 2015, the service was rated Good. At this inspection we found that the service remained Good.

At the time of our inspection the provider confirmed they were providing personal care to 3 people.

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. Risks were assessed and people were kept safe from avoidable harm. Support plans and strategies were in place to provide safe support around behaviours that may challenge. Safe recruitment practices were in place to ensure suitable staff were employed. There were enough staff to provide care and support to people to meet their specific 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 were supported with supervision, training and ongoing professional development that they required to work effectively in their roles. People were supported and encouraged to maintain good health and nutrition.

People told us they got on well with staff and felt well cared for. We observed positive interactions between staff and people. 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 and safe 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 registered manager was present and visible within the home. People and other professionals told us that they had confidence in the management to provide consistently high quality managerial oversight and leadership to 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? 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 ●

ABI Homes - Veryan Place

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 19 October 2017 and was unannounced.

The inspection was carried out by one inspector.

Before the inspection, we reviewed the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We also contacted the Local Authority for any information they held on the service.

We spoke with one person who used the service, three support workers, and the registered manager. We reviewed three people's care records to ensure they were reflective of their needs, 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 living within the service and receiving support from the staff. One person said, "Yes I am safe here." One staff member said, "This is a safe environment for people to be in."

Staff received suitable security checks before starting work within the service. We saw that Disclosure and Barring Service checks (DBS) had taken place, and two professional references were obtained. This ensured that the service did not employ staff that were unsuitable to be working with vulnerable people. All the staff we spoke with told us they had gone through these checks before starting work.

We saw that appropriate assessments of risk had taken place for the people using the service. The service supported people whose behaviour could at times challenge. Detailed assessments of every known area of risk and behaviour were completed, with clear guidelines and strategies for staff to follow. We spoke with staff about the effectiveness of the risk assessments, training and strategies used to support challenging behaviour, and one staff member said, "I think we are all well equipped to keep people safe." We saw that risk assessments identified the person's ability, the support required, and the risk control measures. Risk assessments we saw also promoted the independence of each person as much as possible.

There were enough staff to meet the needs of people. One person told us, "There are always staff around." We saw that there was an appropriate amount of staff on shift to support people according to the defined amount of staff each person required within their care planning.

People told us that they always received their prescribed medicines and the medicines management systems in place were clear and consistently followed. One person told us, "I am happy with the support I get with medication." We saw that medicines were stored safely and accurately recorded.

Is the service effective?

Our findings

Staff had a good knowledge and understanding of the needs of the people they were supporting. They received the training and support they required to do this. The staff we spoke with told us they thought the training was good, and ensured that they were able to effectively support people. Training was tailored to suit the needs of the people using the service, and ensure that staff had the correct skills to keep people safe, whilst at the same time promote independence. We saw that staff all received an induction training package when first starting to work within the service, and on-going training was provided to both refresh knowledge and to gain new skills.

All staff had regular supervision and appraisal, one staff member said, "Supervisions happen regularly. We can talk with the manager at any time." The service was small and we saw that the manager was able to speak with staff easily and offer supervision regularly.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation 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 they were.

People were supported to maintain a healthy and balanced diet and had full choice over the food they ate. One person said, "The food is good, I get whatever I want." We saw that a person was asked what they want for their lunch, and staff quickly prepared it for them. One staff member said, "We encourage healthy options, but it is up to each individual what they want." Care planning showed that people's preferences with food were noted.

People had regular access to healthcare professionals and staff were vigilant to changes in people's health. We saw that visits to health professionals had been documented within people's records, and detailed information around people's health was recorded and monitored.

Is the service caring?

Our findings

People developed positive relationships with staff and were treated with respect. One person we spoke with told us they got on well with the staff and felt like they were cared for well. We saw staff interact with people during our inspection and it was clear that they were respected and cared for by the staff working with them. People were given the time they needed to communicate and make decisions.

People's choices in relation to their daily routines and activities were listened to and respected by staff. We saw that one person had initially planned to go out and join an activity group that they would normally attend on that day of the week. The person changed their mind and instead requested to go out bowling. This decision was respected by staff, who took the person to their preferred destination, as well as checking with them that they were happy with their normal activity and if anything needed to change. One person was in bed asleep during our inspection due to their preference to stay up during the night before. It was clear that people were able to get up as and when they wanted, and their routines were respected.

People were treated with dignity and respect. We observed that people's privacy was respected at all times, and staff knocked on doors before entering. We saw that one person had a sign on their door telling staff that they must knock and wait for the person to respond before entering.

Is the service responsive?

Our findings

People received care that met their specific needs. We saw that full assessments had been carried out for people to identify their needs and make sure the service would be suitable for them. Care plans were regularly reviewed and updated as required, and people confirmed that they were involved in this process. The care plans we looked at contained personalised information about people's likes, dislikes, personal history, routines and preferences. This meant that staff were able support people in a person centred way. All the staff we spoke with told us that care planning was reflective of people's needs and allowed them to understand each person's personality.

People were supported to follow their interests and take part in social activities. Each person had a plan which listed their typical weekly routines, the activities and destinations they liked to go to, and the type of support that would be required. We saw that people had choice and control over what they did, and staff were able to be flexible in their support to enable people to have full choice in what they did.

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 told us, "No I have not had to make any complaints really. I am listened to." We saw that there was a complaints policy and procedure in place which included accessible easy read information for people. The system ensured that any complaints were investigated and responded to appropriately and promptly.

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 service had a positive atmosphere and an open culture. All the staff we spoke with were positive about working at the service and the support they received from the management. One staff member said, "We are a good team, and the manager is very good. We get the support we need and that makes us confident in our roles." During our inspection it was clear that registered manager was knowledgeable about the people using the service, and was able to interact with people in a positive manner.

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 including updates on the people being supported, training and general service updates. The staff we spoke with felt that the meetings offered a forum for discussion and learning.

Quality assurance systems were in place to help drive improvements, including a specific service improvement plan which management had compiled to plan out the continued improvement of various areas within the service. Audits took place regularly to make sure that errors or mistakes were picked up, and actions were taken as and when required. People's opinions and views on the service were captured in a 'people we support' survey, which allowed for people or their family to comment on the quality of the service the person was receiving. We saw that actions could be created to ensure that any issues would be dealt with and improvements made.