

Community Homes of Intensive Care and Education Limited

Heywood Sumner 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

About the service

Heywood Sumner House is a residential care home providing personal care to people with learning disabilities and/or autism. The service can support up to 12 people. At the time of the inspection 12 people were living at the home.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service and what we found

People at Heywood Sumner House were living with a learning disability or autism, which affected their ability to make decisions about their care and support. Where people were not able to give consent, the service delivered care in the person's best interest. However, mental capacity assessments and best interest paperwork was not always in place for people. This was discussed with the registered manager who addressed this and showed us improvements following the inspection.

People told us they were happy and felt safe. Relatives said staff had a good understanding of their loved one's needs and preferences. Risks had been identified and measures put in place to keep people safe from harm. Medicines were managed safely and administered by trained staff.

Staff were well trained and skilled. They worked with people to overcome challenges and promote their independence. The emphasis of support was towards inclusion and enabling people to learn essential life skills. Equality, Diversity and Human Rights were promoted and understood by staff.

People, and their families described the staff as caring, kind and friendly and the atmosphere of the home as relaxed and engaging.

People received pre-admission assessments and effective person-centred support. The service was responsive to people's current and changing needs. Regular reviews took place which ensured people were at the centre of their support.

Care plans were personalised and updated. Staff listened to what people wanted and acted quickly to support them. Staff looked to offer people solutions to aid their independence and develop their skills.

Leadership was visible and promoted good teamwork. People, relatives, and staff spoke highly about the management and staff had a clear understanding of their roles and responsibilities.

Checks of safety and quality were made to ensure people were protected. Work to continuously improve the service was noted and the management team were keen to make changes that would impact positively on people's lives.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 25 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Heywood Sumner House

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

This inspection was completed by two inspectors.

Service and service type

Heywood Sumner House is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This was an unannounced inspection.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We reviewed information we had received about the service. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service. We met with the registered manager, deputy manager, a team leader and five support workers.

We reviewed a range of records. This included four people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including health and safety and quality audits.

We walked around the home and observed care practice and interactions between support staff and people.

After the inspection

We looked at quality improvement plans, quality assurance feedback and policies. We contacted two relatives of people who lived at Heywood Sumner House.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management;

- Risk assessments were in place which gave clear measures for staff to follow to reduce the risk of harm. Assessments covered areas such as; epilepsy, choking, use of the vehicle and accessing the community. A staff member told us, "Risk assessments are useful, they help us understand risks associated to people and what measures are in place to keep people and us [staff] safe".
- We found that positive behaviour support plans were in place, up to date and in line with best practice. These plans gave staff clear guidelines on approaches to use if people displayed behaviours which may challenge the service. A person said, "Staff have really helped me with my anger, the way I think about things and perceptions".
- Physical interventions were occasionally used by staff with some people living at the home. Staff had all received appropriate training and confirmed interventions were only used as a last resort or if the person put themselves or others at significant risk. Interventions had been individually risk assessed and clear recording and analysis took place following all incidents.
- Staff took part in debrief meetings with management following behavioural incidents. The meetings enabled staff to reflect on the incident and discuss events before the incident occurred, actions taken and any learning.
- Regular fire and health and safety checks were completed by the staff and registered manager. These were up to date and accurate.
- Annual safety checks were completed by external professionals such as gas safety and portable appliances.
- People had Personal Emergency Evacuation Plans which guided staff on how to help people to safety in an emergency.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People, relatives, and staff were confident Heywood Sumner House was a safe home to live in. Comments included; "I feel safe living here, I have staff around me and there is no main road which was an issue in my old placement", "I like living here and feel safe" and "People are safe here, we follow procedures and doors are secure".
- Staff could tell us signs of abuse and who they would report concerns to both internal and external to the home.
- Relatives, and staff said they had no safeguarding concerns and would feel confident to use the whistleblowing policy should they need to.
- There were effective arrangements in place for reviewing and investigating safeguarding incidents. There was a file in place which recorded all alerts, investigations and logged outcomes and learning.

- Lessons were learnt when things went wrong. Staff told us the home was always open to learning and improving their systems. The registered manager told us they promoted reflective learning sessions.
- The management team responded appropriately when accidents or incidents occurred. There was an effective system in place which meant these were reviewed, analysed and used as a learning opportunity.

Staffing and recruitment;

- There were enough staff on duty to meet people's needs. A staff member commented, "There are enough staff here. People can go out, it's fairly relaxed and not task led".
- We were told that the registered manager monitored the amount of staff needed based on people's needs and their activities and appointments. Additional staff were used where necessary and shifts were flexible.
- The provider operated a safe recruitment process. Recruitment checks were in place and demonstrated people employed were safe to work with vulnerable adults, had satisfactory skills and the knowledge needed to care for people.

Using medicines safely

- The service had implemented safe systems and processes which meant people received their medicines in line with best practice.
- Medicine administration records were completed and audited appropriately.
- The service had safe arrangements for the ordering and disposal of medicines.
- Medicines were stored securely. Daily temperature checks were completed, and records were up to date.
- The staff responsible for the administration of medicines were all trained and had had their competency assessed.
- Where people were prescribed medicines that they only needed to take occasionally (typically referred to as PRN), guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.

Preventing and controlling infection

- The inside of the home was visibly clean and odour free. People were supported to participate in keeping their home and rooms clean to minimise the risks of the spread of infection.
- There was an infection control policy and cleaning schedule to ensure that risks to people, staff and visitors from infection were minimised. Staff had received infection control training and understood their responsibilities in this area.
- There were hand washing facilities throughout the home and staff had access to personal protective equipment such as disposable gloves and aprons.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People at Heywood Sumner were living with a learning disability or autism, which affected some people's ability to make decisions about their care and support.
- The service was providing support to people in consultation with others and in people's best interests. However, mental capacity assessments were not always completed, and best interest paperwork were not in place for people who required them. We discussed this with the registered manager who told us they would address this as a priority.
- During the inspection the registered manager started making phone calls to people's circle of support and working with people to complete the capacity assessments and paperwork for those who required them.
- Staff showed a good understanding of the MCA and their role in supporting people's rights to make their own decisions. During the inspection, we observed staff putting their training into practice by offering people choices and respecting their decisions.
- Six people had authorised DoLS in place and three further applications had been made to the relevant local authorities. No conditions were attached to the authorised DoLS. Three people living at the home were not subject to DoLS.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care

- People had their needs assessed before they moved into the home. These assessments formed the basis of their care plans.
- People's outcomes were identified and guidance on how staff met them was recorded. Staff knowledge

and records demonstrated plans had been created using evidence-based practices.

- Assessments had been completed in line with current legislation, standards and good practice guidance.

Staff support: induction, training, skills and experience

- Staff told us that they felt supported and received appropriate training and supervisions to enable them to fulfil their roles. A staff member told us, "There is very extensive training here which is good. We can now do it remotely via an app or computer. There is also classroom training for more practical based learning".
- There was a clear induction programme for new staff to follow which included shadow shifts and practical competency checks in line with the Care Certificate. The Care Certificate is a national induction for people working in health and social care who have not already had relevant training.
- New staff were complimentary about the induction process. One new staff member told us, "My induction was very good; informative and useful. I had a week of shadowing different shifts, reading and getting to know people".
- Supervisions took place with staff who told us they found these sessions useful.

Supporting people to eat and drink enough to maintain a balanced diet

- People told us they enjoyed the food at Heywood Sumner House and some liked cooking and baking. One person told us, "I had Sheppard's pie today. I tend to eat what is put in front of me". A relative said, ""Food is great and looks good when I go there".
- Staff understood people's dietary needs and ensured these were met. Where nutritional needs had been assessed clear guidelines were in place and understood by staff.
- People took part in choosing meals. A person said, "I can put my opinion in for meals and the chef will fit it in. We can ask for alternatives as well".

Supporting people to live healthier lives, access healthcare services and support

- People had access to health care services as and when needed. Health professional visits were recorded in people's health files which detailed the reason for the visit and outcome. Recent health visits included; GP, neurologist and community nurse.
- People received an annual health check as per best practice for people with a learning disability.
- Information was recorded ready to be shared with other agencies if people needed to access other services such as hospitals. Documents used included; hospital passports, and health action plans.

Adapting service, design, decoration to meet people's needs

- People told us they liked their home and felt comfortable living at Heywood Sumner House. People had the opportunity to choose their room colours and furniture. One person said, "I like the house and my bedroom".
- Heywood Sumner House was a large detached property which had extensive grounds. There was a games room, lounge, dining room and kitchen with six bedrooms on the ground floor. A computer room and six further bedrooms on the second floor with an additional staff sleep in room and bathroom. A person told us, "When I first came here I found it massive. I like it and enjoy the gardens".
- We were told that the home was planning some renovation to the kitchen which appeared a little tired and in need of replacement.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and relatives told us staff were kind and caring. People's comments included; "Staff are caring and look after me well" and "Staff are really nice and have helped me a lot". A relative said, "Staff are kind and caring".
- People's cultural and spiritual needs were respected. Staff encouraged people to receive visitors in a way that reflected their own wishes and cultural norms, including time spent in privacy.
- Staff were knowledgeable about people's history, family and friends, which meant staff could have conversations with people about things that were important and of interest to them.
- Staff received training in equality. Staff told us they would care for anyone regardless of their background or beliefs.

Supporting people to express their views and be involved in making decisions about their care

- People were able to express their needs and choices and staff understood their way of communicating.
- We observed people being supported to make choices and decisions for themselves. Some people chose to use verbal communication whilst others chose to use photos and gestures.
- Staff told us that decision making and offering choices was important. A staff member said, "Asking people for their preference in things is important. We [staff] would not want to assume, get it wrong and make people upset".
- People and relatives were pleased with the care delivered at Heywood Sumner House. A person said, "I'm happy with my care and staff who are here". A relative said, "I think we are pretty happy with the care and the home".
- Where needed, the home sought external professional help to support decision making for people such as advocacy services.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect. We observed staff knocking on people's doors before entering and not sharing personal information about people inappropriately.
- People's right to privacy was supported. A staff member said, "We respect the people as people. Encourage them to do certain tasks for themselves and always close curtains and doors whilst delivering personal care".
- Promoting independence was important to staff who supported people to live fulfilled lives. We observed people being supported to do tasks for themselves. A person told us, "Independence is important to me. I like to make my own food and drinks. I am being supported to manage money better which is good". A staff member said, "Some people are more independent than others. We use an encourage and support

approach rather than a do for you one".

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People told us they were involved in the planning and reviews of their care. We read a compliment from a manager of another home in the area which read, 'I witnessed really lovely personal interaction and engagement with residents. I was so impressed with the person-centred and strengths-based care planning'.
- Care plans were personalised and updated in response to people's changing needs. Long and short-term goals were clear, and achievements captured. Staff told us that care plans were really detailed and useful to deliver good care and support to people.
- People's likes, dislikes and preferences were known and led to the delivery of personalised care. Staff used this information to care for people in the way they wanted.
- Heywood Sumner House responded quickly to people's needs. A person said, "They [staff] have really helped me. I am proud of my achievements and learnt new skills".

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to access the community and participate in activities which matched their hobbies and interests. These were reflected in individual support plans. A person said, "Activities vary. I went to the cinema last week and am going out for a meal this week. I enjoy walks and cycling".
- During the inspection we observed people being supported to access the community. People were supported to go out for lunch, visit cafes and attend appointments.
- Staff considered how barriers due to disability and complex behaviour impacted on people's ability to take part and enjoy activities open to everyone.
- Staff were creative in their approach when supporting people to make decisions about activities they wished to participate in.
- People were supported to develop and maintain relationships to avoid social isolation. This included contact with those important to them including family, friends and other people living at the home. A person told us they had been supported to form a relationship with a partner who they were meeting for dinner tomorrow.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were identified, recorded and highlighted in care plans. People had profiles in place. These reflected people's needs and were shared appropriately with others, for example, if someone was admitted into hospital.
- People's identified information and communication needs were met.
- Copies of information and procedures were also available in easy read format. For example, safeguarding and complaints.

Improving care quality in response to complaints or concerns

- Heywood Sumner House welcomed complaints. The registered manager told us, "Complaints help us learn and develop".
- The service had a complaints procedure in place; this captured the nature of complaints, steps taken to resolve these and the outcome. We found that complaints had been fully investigated, outcomes discussed with the complainant and, where necessary, improvements made.
- People and relatives told us they knew how to raise concerns and make complaints. A person said, "I would speak to staff or [registered manager name] if I wasn't happy".

End of life care and support

- The service had started to identify end of life wishes and preference with people at Heywood Sumner House and their families. We noted that some people also had funeral plans in place.
- The registered manager understood the importance of capturing people's preferences and choices in relation to end of life care because a sudden death may occur.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The management team promoted an open, person-centred culture and had a passion for inclusion and making a difference to people.
- Staff, people and relatives were positive about the management of the home. Comments included; "[Registered manager's name] is a good manager. They care and have my best interests at heart", "The deputy manager is lovely. Leads us well. They understand everything and makes us feel safe on duty" and, "We have complete trust in [registered manager's name], they are well balanced and very good".

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager and area manager understood the requirements of the duty of candour, that is, their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements;

- The management team demonstrated a commitment to ensuring the service was safe and of high quality. Regular checks were completed by the registered manager and management team to make sure people were safe and that they were happy with the service they received.
- Areas regularly audited included; care files, health and safety, medicines and infection control. However, the care file audits did not identify the areas found in relation to MCA paperwork during the inspection. The registered manager told us they would review this audit process. We were told the MCA improvements would be completed by the end of January 2020.
- The registered manager had ensured they had communicated all relevant incidents to CQC as required by law.
- The management and staff were clear about their roles and responsibilities. Duties were clearly detailed in staff job descriptions which were included in personnel files.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff told us they felt supported, valued and listened to by the management team. A staff member told us, "I feel involved and listened to. I also feel respected as staff member".

- Regular staff meetings took place which gave staff an opportunity to discuss topics, follow up on actions set in previous meetings and discuss the people they were supporting. Reflective learning took place in these meetings.
- People, relatives and staff completed annual quality assurance questionnaires. The feedback was analysed, and improvement plans drawn up based on this feedback.
- Heywood Sumner House worked in partnership with other agencies to provide good care and treatment to people. For example, local learning disability teams.
- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.