

Arcare (West Midlands) Limited

# Hilton 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:

Hilton House is a residential care home that is registered to provide personal care for up to three people who have a learning disability and/or autism. There were two people living at the service at the time of the inspection.

People's experience of using this service:

Staff understood their responsibilities to protect people from abuse and discrimination. They knew to report any concerns and ensure action was taken. The registered manager worked with the local authority safeguarding adults team to protect people.

Staff were supported in their roles and received an effective level of training. They told us they were happy with the level of training and support they received and we observed them supporting people in a competent and caring manner.

People were protected from harm by the provider having effective systems in place to monitor medicine management, staffing, infection control and upkeep of the premises.

Staff promoted people's dignity and privacy. Staff provided person-centred support by listening to people and engaging them at every opportunity. Staff were caring and understanding towards people. People using the service appeared comfortable in the presence of staff working in the service.

The premises provided suitable accommodation for people with communal areas and bedrooms which were personalised to people's individual interests.

Support plans were detailed and reviewed with the person and their relatives when possible. Staff worked with and took advice from health care professionals. People's health care needs were met.

People had a variety of internal activities and external activities, which they enjoyed on a regular basis.

The registered manager ran a well organised service. People's views were sought, and opportunities taken to improve the service. Formal supervision meetings were carried out and staff were also supervised informally. They told us they were supported and clear about what was expected of them. Audits and checks were carried out, so any problem could be identified and rectified.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The care service supported people in line with the values that underpin the Registering the Right Support and other best practice guidelines. These values include choice, promotion of independence and inclusion.

People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Rating at last inspection:

The service was rated as Good at the last inspection. The inspection report for the last inspection was published on 09 February 2016.

Why we inspected:

This was a scheduled inspection based on the previous rating.

Follow up:

We will continue to carry out ongoing monitoring and will inspect the service in line with its rating.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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.

# Hilton 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

The inspection was carried out by one Adult Social Care inspector.

#### Service and service type:

The service is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement. CQC regulated both the premises and the care provided; both were looked at during this inspection.

The home accommodates three people and at the time of the inspection, two people were living in the home.

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:

The inspection was unannounced.

#### What we did:

We spoke with both people living in the service. We also spoke with the registered manager and one support worker. We observed the care and support provided and the interaction between staff and people.

We looked at two people's care records and associated documents. We looked at previous inspection reports, rotas, audits, staff training and supervision records, health and safety paperwork, accident and

incident records, complaints and compliments. We also looked at records that related to how the home was managed, such as quality audits, fire risk assessments and infection control records.

Before our inspection we reviewed all the information we held about the home, including notifications of incidents that the provider had sent us. We looked at the 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.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- The service had effective systems in place to ensure people were protected from the risk of abuse
- People told us they were safe at Hilton House. One person told us "I like living here the staff are really nice".
- Staff we spoke with described how they would report suspected abuse and were confident the registered manager would act on their concerns.
- Staff were also aware which other organisations they could contact if their concerns were not acted on.

Assessing risk, safety monitoring and management

- When people were supported to access the community, comprehensive plans and risk assessments were in place to ensure people could access the community safely both locally and nationally.
- Environmental risks were managed at the service. For example, required checks had been carried out on gas, electricity and the fire safety systems in place at the service.
- A Legionella risk assessment was in place.

Staffing and recruitment

- We checked recruitment records which demonstrated that staff were recruited safely and necessary checks were made to ensure staff were suitable to work with vulnerable people.
- Staff we spoke with told us they felt they were enough staff working at the service to support people effectively.
- People told us there were enough staff and people were able to go out when they wanted to.
- Our observations evidenced that staff working at the service had the skills and experience to communicate with and support people effectively.

Using medicines safely

- Staff who administered medicines received appropriate training to do so safely.
- The medicine systems were regularly audited by the management of the service.
- Records demonstrated that medicines were administered to people as directed by the prescribing professional.
- The service had worked with the GP over the last few years to reduce the amount of medication that people were taking. This in line with a national NHS initiative.

Preventing and controlling infection

- The service was clean, tidy and free of any malodours.
- Systems were in place to ensure that the cleanliness of the service was maintained and monitored.
- The service had received a five star food hygiene rating from the food standards agency and staff had

received training in food hygiene.

#### Learning lessons when things go wrong

- When incidents occurred, incident reports were completed and reviewed by the registered manager.
- Where appropriate care plans and risk assessments were reviewed and measure put in place to reduce the risk of further incidents occurring.



# 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

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People had their needs assessed and a support plan in place which explained to staff how the person should be supported to meet those needs.
- Goals were set with the person and staff supported people to meet work towards these goals. We saw progress was regularly reviewed as appropriate.
- People were supported to make choices about their needs and support provided because effective communication systems were in place.

Staff support: induction, training, skills and experience

- Staff told us they received effective training and excellent support from the registered manager, who they told us was always available for advice and guidance.
- People benefitted from having a staff team who were encouraged by the provider to undertake further qualifications and training to develop their practise.

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

- people were supported to choose what they wanted to eat and drink throughout the day. Food provided was healthy and nutritious. People were able to choose what they wanted to eat, and they told us they liked the food provided.
- People's dietary needs were met effectively by the service.

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

- The service had been adapted to meet the needs of the people using the service.
- One person showed us their room which they had personalised to reflect their interests. This person told us "I really like my room and I help with cleaning up my room".

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- People told us they have their healthcare needs met. One person said, "staff take me to see the doctor when I'm ill".
- Records were maintained of the outcomes of health appointments and systems in place to ensure further

appointments were not missed.

- People benefitted from having Hospital Passports in place. These contained essential information on how to support the person if they were admitted to hospital.
- People had annual health checks and people were screened for health conditions that may not present any symptoms in the early stages.

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

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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. We found the service was working within these principles and conditions put in place were being met.

- Our observations demonstrated that people living in the home were not restricted in any way inside the service and were able to access all areas of the home and garden freely.
- One person accessed the community independently and confirmed with us that they were able to come and go when they wanted to.

# 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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- One person told us "The staff are really nice and look after us well".
- From our observations it was clear staff knew people very well and were aware of their preferences and used this knowledge when supporting them.
- Staff showed genuine concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way.

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

- Staff enabled people to make decisions about their care and knew when people wanted help and support from their relatives. Information was displayed in the home about local advocacy services. The registered manager informed us this would be accessed if needed by people.
- Records of care review meetings demonstrated people were actively involved in making decisions about their care and support. We also saw relatives were involved where possible and appropriate.

Respecting and promoting people's privacy, dignity and independence

- People's privacy was respected and all personal care was provided in private.
- People were enabled to maintain and develop relationships with those close to them, social networks and the community.
- People were supported to focus on their independence in all areas of their lives. They were supported to be independent in their ideas and choices and this meant people enjoyed freedom and control of their life.
- People being in control and independent demonstrated the provider's values were embedded in staff culture. A member of staff told us, "People are given information to enable them to make real choices about their care".

## Is the service responsive?

### Our findings

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

Good: ☐ People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were supported to have an active life. When we visited one person went shopping and out for lunch. They told us they went out every day and were able to choose what they wanted to do.
- Activities were provided to people seven days a week and at all times of day including the evenings. One person told us about a Ken Dodd show they attended which they really enjoyed.
- Activities included, disco's, cooking, shopping trips, meals out and people were supported to go on holidays. One person told us they enjoyed going on holiday and were involved in choosing where they wanted to go.

Improving care quality in response to complaints or concerns

- People were supported to provide feedback to the management team at regular meetings with their keyworker. We viewed the minutes of these meetings which demonstrated people's views and opinions were acted on.
- People knew how to make complaints should they need to. Information about making a complaint was accessible and displayed in the home.
- An accessible complaints policy was in place at the service. People were confident their concerns would be taken seriously and dealt with effectively. One person was also supported to raise a complaint against a local hospital following some poor service they received.
- There had not been any complaints. The registered manager told us about the process in place to act upon any complaints they received. They told us complaints would be used as an opportunity to improve the service.

End of life care and support:

- There was no one living at the service was receiving end of life care.
- Where people's wishes were known about how they wished to be cared for at the end of their lives, this was recorded in their care files. It was clear the person had been involved in this process and made their views none.

# 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The registered manager demonstrated a commitment to provide person-centred, high quality care by engaging with everyone using the service and stakeholders.
- Staff and the registered manager involved people and their relatives in all aspects of the service and their care.
- Staff told us the registered manager listened to them and was keen to hear ideas on how the service could be improved. They told us the registered manager was always available and approachable. Staff told us, "They [registered manager] are very supportive and always around to give guidance and advice".

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

- The registered manager demonstrated a commitment to ensuring that Hilton House delivered a high quality, safe service to people living at there.
- Regular checks and audits were completed by the registered manager to ensure people were safe and were happy with the service they received.
- The registered manager had ensured they had communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The services mission statement was displayed in the home along with the services values.
- These were embedded within the staff team who were passionate about providing a person centred service for all the people living at the service.
- People and staff were engaged and able to speak up freely, raise concerns and discuss ideas.
- People had regular service user and family meetings to discuss the service they received. The feedback had been used to continuously improve the service.

Continuous learning and improving care

- The registered manager kept up to date with best practice and passed this information on to the staff team at regular team meetings.
- The registered manager was very proud of the staff team that worked at Hilton House and it was clear the staff respected the registered manager.
- Regular team meetings were held at the service which encouraged staff to reflect on changes that had been implemented and how these had affected the service. They also discussed new changes they could make to improve the service.

#### Working in partnership with others

- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.
- The service had close links with local health professionals, the local authority and the Clinical Commissioning group