

Epiphany Trading Limited

# Chrysalis Holidays

## Inspection report

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21 November 2018  
12 December 2018

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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 was carried out on 19, 21 November and 12 December 2018 and was announced.

Chrysalis Holidays provides supported holidays domestically and overseas for adults with learning disabilities. All holidays are led by an experienced manager and the activities are undertaken by qualified professionals where appropriate. The service is managed from an office located in Newton le Willows.

The service has a registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers they are registered persons. Registered persons have a legal responsibility for meeting the requirements of the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last inspection published in November 2017 we found that there were a number of improvements needed in relation to support, training and supervision, also quality audit systems had not identified areas for improvement. These were breaches of Regulation 18 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the last inspection, we asked the provider to complete an action plan to show what they would do and by when to improve the key questions of Effective and Well-led to at least good. The provider sent us an action plan that specified how they would meet the requirements of the identified breaches.

This inspection was undertaken to check the required improvements had been made. We found that the registered provider was meeting all the legal requirements.

The registered provider had audit systems in place that were regularly and consistently undertaken. The audit system identified areas of good practice along with areas highlighted for development and improvement.

People and their relatives spoke positively about the activities that had been undertaken during their holidays. People had the opportunity to participate in a wide range of activities of their choice.

The registered provider had safe recruitment practices in place. All staff had completed an induction at the start of their employment and undertaken shadow shifts with an experienced team member. Essential training was consistently completed along with refresher training when required in accordance with good practice guidelines. Staff received support through supervision and team meetings. Staff told us they felt well supported.

People's needs were assessed before they commenced any holidays with the service. This information was used to create care plans and risk assessments specific to the individual. These documents included clear guidance for staff on how to meet people's individual needs. People's needs that related to age, disability,

religion and other protected characteristics were considered throughout the assessment and care planning process.

Staff demonstrated a good understanding of safeguarding and had all received training. Staff felt confident to raise any concerns they had and believed they would be acted upon promptly by the management team. The registered provider had safeguarding policies and procedures in place.

People had developed positive relationships with the staff that supported them during their holidays. Privacy and dignity of people was respected and people's independence was promoted through documentation.

Medicines were managed safely in accordance with best practice guidelines. There were medicines policies and procedures in place, staff that managed people's medicines had all received training and had their competency regularly assessed.

People were complimentary about the food and drink they had during their holidays. They told us they were always offered choice and supported as required.

The Care Quality Commission as required by law to monitor the operation of the Mental Capacity Act (MCA) 2005 and report on what we found. We saw the registered provider had policies and procedures available for staff to follow in relation to the MCA. Staff demonstrated a basic understanding of this and had all completed training.

Feedback from people and their relatives was consistently sought following every holiday and used to identify new holiday ideas as well as areas for development and improvement.

There was a clear complaints policy and procedure in place available in accessible formats. Relatives told us they felt confident to raise any concerns and thought they would be promptly acted upon.

Policies and procedures were available to staff to offer them guidance within their role and employment. These were regularly reviewed and updated by the registered provider.

## 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 good.

People's medicines were managed safely in accordance with good practice guidelines.

Risk assessments were in place that identified and mitigated risk through clear guidance for staff to follow.

Staff understood actions to be taken if people were at risk of abuse. Policies and procedures were in place and staff had received training.

### Is the service effective?

Good ●

The service was good.

People received appropriate support that ensured their food and drink needs were met.

People's rights were protected by staff who had received training and had knowledge of the Mental Capacity Act 2005.

Staff received training to ensure they had the right knowledge and skills to undertake their role and meet people's needs.

### Is the service caring?

Good ●

The service was good.

Positive relationships had been developed between people and the staff that supported them on their holidays.

People were supported by kind and caring staff.

Staff understood the importance of maintaining each person's privacy and dignity.

### Is the service responsive?

Good ●

The service was good.

People's care plans were individual and reflected their specific needs. They included guidance for staff to follow.

The registered provider had a complaints policy and procedure that was available in easy read and pictorial formats.

People enjoyed a selection of activities available to them at each holiday.

### **Is the service well-led?**

The service was good.

Quality audit checks were in place and consistently completed to identify areas for development and improvement.

The registered provider had up-to-date policies and procedures in place to support and guide staff.

The registered provider regularly sought feedback from people supported and their relatives.

**Good** ●

# Chrysalis Holidays

## **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 checked 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 was a comprehensive inspection carried out by one adult social care inspector. The inspection took place on 19, 21 November and 12 December 2018 and was announced. The registered provider was given notice as we needed to be sure that someone would be available during our visit.

We checked the information that we held about the service and the registered provider. This included statutory notifications sent to us by the registered manager about incidents and events that had occurred at the service. I notification is information about important events which the registered provider is required to send us by law.

We looked at four staff recruitment and training files, five care plans and risk assessment files, medicines management systems and other records that related to the management of the service.

We spoke by telephone with two people and five relatives of people that are supported by the service.

# Is the service safe?

## Our findings

People told us they felt safe with chrysalis holidays and the staff looked after them well. Relatives comments included "I know [Name] is well looked after and safe" and "[Name] would tell me if they were ever worried and named have never had cause to."

The registered provider continued to have effective systems in place to safeguard people from abuse. Staff had all received training and demonstrated a good knowledge and understanding of this area. Staff were aware of their responsibilities in relation to safeguarding the people they supported. They could describe different types of abuse, signs and symptoms to be aware of and the clear process for reporting any concerns they had.

Recruitment procedures at the service were safe. Recruitment records held fully completed application forms, references from up-to-date employers and a disclosure and barring check (DBS). The DBS carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.

Each holiday had a holiday manager that took responsibility and led that holiday. The registered provider and registered manager took the lead on holidays throughout the year. Staffing levels were reviewed and were appropriate for the number of people going on holiday and the level of their need. For holidays that took place abroad an additional staff member was put in place to allow for staff sickness or a person requiring additional support while away.

Individual risk assessments were in place where areas of risk had been identified. Clear guidance that included the level of intervention required was in place for staff to follow to mitigate the risks to people. For example, one person's risk assessment described their mobility due to them having an unsteady gait and being unable to walk long distances. Staff were guided to support this person with a wheelchair when out in the community to maintain their safety as they were assessed as a very high risk of falls. Another person had poor safety awareness regarding traffic and clear guidance was in place for staff to monitor this person very closely to ensure they remained safe. This meant staff offered the correct level of intervention relevant to each person they supported to mitigate any risk.

Accidents and incidents were promptly and fully recorded by staff and reviewed by the registered manager. These documents were also reviewed by the registered provider to identify any areas of development and improvement. Staff had access to all required information to follow in the event of an emergency. Information included guidance to staff about who to contact along with all appropriate contact details.

Records showed that on occasions people had become unwell while they were away on holiday and appropriate healthcare support and advice had been sought. Feedback comments from one person included "Thank you so much to [Staff Name] who looked after me when I got a chest infection and kept my sister informed. I received excellent care."

All staff had completed infection control training and were able to describe the importance of following best practice guidelines. This included the use of personal protective equipment such as disposable gloves and aprons that were readily available to staff.

People's medicines were managed safely and in accordance with best practice guidelines. People took their medicines with them when they went away with Chrysalis holidays. A robust system was in place for checking medicines ready for departure and returning them at the end of people's holidays. All staff had received training and people's care plans described the level of support they required with their medicines. PRN 'as required' medicines had clear guidance in place and were recorded appropriately.

## Is the service effective?

### Our findings

During our last inspection we found a breach of Regulation 18 (2)(a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, as the provider had failed to ensure staff received appropriate support, training and supervision to enable them to fulfil the requirements of their role and meet the needs of the people they supported. At this inspection we found the requirement had been met.

People spoke positively about the staff and their comments included "[Name] loves the staff and gets very excited about who is going to support her" and "The staff know [Name] very well and I never have any concerns about the support she receives."

Staff had all completed an induction at the start of their employment and had undertaken shadow shifts to fully understand the needs of the people they supported and the requirements of their role. Staff undertook the Care certificate which is a nationally recognised qualification based on a minimum set of standards, that social care and health workers following their daily working life. The standards give staff a good basis from which they can further develop their knowledge and skills. Essential training had been consistently completed and regular refresher training updates took place in accordance with good practice guidelines.

Staff had undertaken additional training in diabetes awareness, epilepsy and autism to have a better understanding of the needs of the people they supported.

People were supported to eat and drink in accordance with their assessed needs. People's care plans included information about their food likes and dislikes along with the level of assistance they required. Staff had a good understanding of people's dietary requirements, preferences and choices. Relatives comments included "[Name] enjoys all the meals and eats well during their holidays" and "If [Name] doesn't like what's on the menu they are always offered an alternative."

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 or are helped to do so when required. When they lack the mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. The registered manager told us that mental capacity assessments and best interest decisions would be evidenced should they be required.

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 MCA. People who normally live in their own homes can only be deprived of their liberty through a Court of Protection order (CoP). There were not any people on a Court of Protection order at the time of our inspection.

We checked whether the service was working within the principles of the MCA and found that it was. The registered manager and staff team had a basic understanding of the Mental Capacity Act and had all completed training.

## Is the service caring?

### Our findings

The service received many positive comments from people that they supported to go on holiday. These included "All the staff were so helpful and caring", "I liked the staff that supported me" and "Thank you to all the staff for taking such good care of me." Relatives comments included "The staff are excellent and reassuringly understanding of [Name's] needs", "Thank you to [Staff Name] who did a wonderful job caring for [Name]" and "[Name] looks for holidays that particular staff members are supporting as they have their favourites. All the staff are amazing and cannot fault them."

People and their relatives told us that staff were consistently kind and caring. They described being looked after by staff when they had been unwell or needing reassurance at any time. People told us they were very relaxed with the staff and that staff got to know them well as they spent so much time together during the holiday.

People described being treated with dignity and respect. They told us that staff supported them with personal care tasks always in the privacy of their bedroom or bathroom with the door and curtains closed. They said that staff knocked on their bedroom door and waited for an answer before they entered. This meant that staff promoted people's privacy and dignity.

People told us that staff had a good understanding of their individual needs. They said that staff encouraged them to be as independent as possible and do as much as they could for themselves. One relative said "[Name] is very proud that they can wash their own face and brush their own teeth. Staff encourage and promote this. All the other care required seems to take place very smoothly to ensure [Name] is consistently clean and well presented."

Staff had a good understanding of people's needs. Staff initially used the care plan to understand people's likes and dislikes, interests and hobbies as well as personal preferences. Over the course of the holiday and during repeated holidays they developed an excellent understanding of each person they supported.

Some people had specific communication needs. Information and guidance was available for staff that described the best way for this to be supported. One person did not use verbal communication and their plan described that they would cry out if feeling uncomfortable and also that they liked to hug themselves for comfort. One person required two pairs of glasses for reading and for long distance. The importance of these being available, in good repair and clean for clear vision was described. Another person required hearing aids and guidance was available for staff including the importance of checking the batteries to ensure they were working fully.

People's records were stored securely on a password protected electronic system that was only accessible to allocated people. Paper records were held in locked filing cabinets within the service offices.

## Is the service responsive?

### Our findings

People and their relatives spoke very positively about all the activities that were participated in during their holidays. They described listening to music, watching shows, taking a ride on a steam train, baking bread and jewellery making. Comments included "[Name] always chooses a themed holiday and has loved everyone", "[Name] loved the 'Bake off' themed holiday and still talks about it now" and "We love receiving the booklet of holiday photographs after [Name] returns home as this means we can see the fun they've had but also continue the conversation around this, to keep the memories alive."

People told us they had the choice to join in activities or not. One person described not liking a particular activity and told us staff always offered them an alternative as they understood this. Each holiday offered a selection of daily activities and people told us they chose their holidays on the basis of the activities available. Comments received by the service from people had included "The itinerary was interesting and varied", "I enjoyed the entertainment", "I enjoyed everything about my holiday" and "I loved the beach and museum."

People's individual needs were assessed prior to them being supported to go on holiday. People and their relatives where appropriate were included in this process. Information from the assessment was used to form the care plan and risk assessments for each person's care plan file. Information held within the care plans reflected people's individual needs and included information about their medical history, interests and activities, personal care, mobility and continence.

People's needs in relation to equality and diversity were considered during the assessment process and included within the care plans. These needs included age, disability, religion and other protected characteristics.

Chrysalis holidays supported a high number of people to go on repeated holidays. Each person's care plan and risk assessments were reviewed and updated if required prior to each new holiday. One relative told us "The manager updates [Name's] care plan and risk assessment well before the holiday date. When there has been any change they have ensured the staff know about it so they can meet [Name's] needs."

The registered provider had a clear complaints policy and procedure in place. This was available in an easy read and pictorial format. People and their relatives told us that they knew how to raise a concern or complaint and felt confident to do so. Their comments included "I have had no cause to complain as [Name] always enjoys their holidays and the staff that support them" and "I feel confident the manager would respond to any concerns I had." There had been two complaints during 2018 that had been fully investigated and responded to in accordance with the provider's procedure.

# Is the service well-led?

## Our findings

During our last inspection we found a breach of Regulation 17 (1)(2)(a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, relating to good governance, as the provider had failed to operate effective systems to assess and monitor the quality, safety and effectiveness of the service. At this inspection we found this requirement had been met.

The registered provider and registered manager undertook regular quality checks at holidays undertaken within the UK. They arrived unannounced and followed a quality audit process that was recorded. Areas for development and improvement were identified and promptly actioned. Medication audits, care plan and financial audits were regularly undertaken. Actions were identified and completed in a timely manner.

Feedback was sought consistently from people and their relatives when appropriate following every holiday. People could use a smiley face system to reflect their feeling about the holiday or answer questions that related to the accommodation, activities available, staff supporting them, food and drink as well as space to give suggestions for improvements or developments. People were encouraged to give ideas for new holidays or different activities. The registered provider used this information to adapt or introduce new holidays for the future.

Team meetings were held towards the end of each holiday where the holiday manager would ensure all staff had felt fully supported and they discussed any areas for improvement or learning to be gained. Staff were encouraged to put forward ideas and suggestions about how the particular holiday could be improved for the next time.

Full team meetings were held during the year which provided an opportunity for staff to voice their opinions and put forward their views. Staff told us they were always respectful at these meetings and listened to one another.

Staff told us they had regular staff social events arranged by the management team which helped to increase staff morale and enabled staff to see one another outside of work. They described these events as fun and stated they involved an elemental of team building.

The registered provider had up-to-date policies and procedures in place that were available to staff for guidance about their work role and employment. These were available through a secure network at all times that staff were working.

The ratings from the last inspection were clearly displayed at the service and a link was clearly available on the website to the most up to date CQC rating and report.

Registered providers are required to inform the CQC of certain incidents and events that happen within the service. The service had notified the CQC of all significant events which had occurred in line with their legal obligations.

