

North East Autism Society Thornhill

Inspection report

21 Thornhill Park
Sunderland
Tyne and Wear
SR2 7LA

Tel: 01915143083

Date of inspection visit:
15 March 2021

Date of publication:
22 April 2021

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service effective?

Inspected but not rated

Is the service responsive?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

21 Thornhill provides personal care and accommodation for up to seven people. There were six people living at the home at the time of our inspection.

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

The provider had various infection control procedures in place. The majority of these procedures were robust and followed government guidelines. However, we did highlight some minor issues on the day of inspection. The registered manager and nominated individual took action to address these issues.

People received safe care and were protected from abuse. Staffing levels were at an appropriate level to care for people safely.

People had ongoing access to various healthcare professionals. Staff supported people to engage in a number of activities. The provider did however, acknowledge activities had not been at their usual level due to the current pandemic restrictions in place.

Positive comments were received from relatives, staff and one professional including how well the service was run and the level of care people received. Various quality checks were completed to ensure the quality of care provided was of a good standard.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture.

Right support:

- Staff supported people to live the best lives they could. Each person's care had been tailored to meet their unique needs.

Right care:

- The service provided an environment which allowed people to live their lives in a way which supported their dignity, privacy and human rights. Relatives told us they care people received was very good and they had seen improvements in people's well-being whilst living at the service.

Right culture:

- The registered manager and staff team worked together to create an inclusive culture within the service. All feedback received was positive regarding the aims, ethos and cultural environment in the service. The service ensured people maintained contact with their relatives during the current pandemic. This had included staff driving one person to their family home to allow them to see their family whilst remaining in the provider's vehicle (to support with social distancing).

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 8 February 2018).

Why we inspected

We undertook this targeted inspection to check specific concerns we had received about people's access to healthcare professionals to support their well-being; people engaging in activities, people having access to their own finances and the culture within the service. The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service effective?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service responsive?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Thornhill

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was undertaken by one inspector.

Service and service type

21 Thornhill is a 'care home.' People in care homes receive accommodation and nursing or personal care as a 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. Registered managers 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 before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and infection control nurse. We used all of this information to plan our 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.

During the inspection

We spoke with the registered manager, the deputy manager and nominated individual. We reviewed various documents in relation to people's care.

After the inspection

We spoke with three members of staff, two relatives and we received written feedback from one professional. We also sought clarification from the registered manager to validate evidence found.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection was to check specific concerns we had about people's safety and their finances. We will assess all of the key question at the next comprehensive inspection of the service.

Preventing and controlling infection

- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date
- We were somewhat assured the provider was preventing visitors from catching and spreading infections. An issue was identified during inspection whereby a contractor who was on site, had not adhered to the provider's visiting protocol. This was discussed with the registered manager and nominated individual who took immediate action to address the issue.
- We were somewhat assured the provider was using PPE effectively and safely. Staff were wearing PPE, but at times, some elements of PPE were being worn but were not required to be worn. For example, staff who were not supporting service users or carrying out cleaning were wearing aprons which were not required. This was discussed with the registered manager and nominated individual who took immediate action to address the issue.

We have also signposted the provider to resources to develop their approach.

Systems and processes to safeguard people from the risk of abuse; Staffing and recruitment

- People were protected from abuse. The provider had a policy and a system in place to keep people safe. Staff had received safeguarding training and they were confident in their ability to identify and act upon any safeguarding issues. One staff member told us, "I would recognise the signs if someone was being abused. I would tell either my senior, the deputy or the registered manager. If they did nothing, I would tell my Operations Manager and I would also tell you, the Care Quality Commission."
- The registered manager had made appropriate safeguarding referrals to the local authority as well as notifying the Care Quality Commission of any safeguarding issues.
- Appropriate documentation was in place for staff to follow to keep people safe and from potential harm.
- Relatives told us people were very safe living at the service. They told us, "I have no concerns whatsoever

about [person's name], staff take very good care of him and know him very well."

- Staffing levels were at an appropriate level to care for people safely. Staff confirmed this.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about.

The purpose of this inspection was to check specific concerns we had about people's access to healthcare professionals and people's choice. We will assess all of the key question at the next comprehensive inspection of the service.

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

- People had access to various external healthcare professionals to support their health and well-being. Records confirmed this.
- Relatives told us people had regular appointments with healthcare professionals. Relatives were confident staff and the registered manager would ensure medical advice was sought when needed. They told us, "[Person's name] is under the care of a few consultants and I know their care is reviewed," and "Staff do an excellent job. [Person's name] has had no major incidents for a long time. I know staff would seek professional advice if needed."

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 when this is in their best interests and legally authorised under the MCA.

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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were supported where possible, to make their own decisions regarding elements of their care. For example, care plans included people's preferred choice of meals, how they wished to spend their time both inside and outside of the service, and how they wished to spend their own money. Relatives told us they had no concerns regarding people's finances. Where required, best interest decisions had been completed with the appropriate people to ensure people's health and well-being was promoted.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about.

The purpose of this inspection was to check a specific concern we had about people's activities. We will assess all of the key question at the next comprehensive inspection of the service.

How do people receive personalised care that is responsive to their needs

- People received person-centred care which reflected their own personal needs.
- People were supported to engage in a variety of their chosen activities. However, due to the current pandemic some activities such as swimming and trampolining were not possible. As such staff supported people to go for walks in the local and extended community. Staff told us, "We have a disco themed night each Friday for people and they really enjoy this," and "We have suggested to the [registered manager's name], to create a gardening/vegetable patch area so people can create their garden and grow their own vegetables. I am sure people will love doing this."
- People had been supported to maintain contact with their families during the pandemic. Relatives confirmed this.
- One visiting professional was very complimentary regarding the personalised care people received at the service. They told us, "The care received there is very good, and the staff are very invested in the welfare of the clients there. I have absolutely no concerns, and I feel like they do such a good job that they just need to keep it up!"

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 as good. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about.

The purpose of this inspection was to check specific concerns we had about the culture and overall management of the service. We will assess all of the key question at the next comprehensive inspection of the service.

How are the people who use the service, the public and staff engaged and involved

- Feedback had been sought from relatives in 2019 via a formal questionnaire. All responses were positive. Relatives told us they remained positive about the care people received. Comments included, "Staff will always listen to us and take all our comments on board," and "We have email and verbal communication all the time with the service – yes we are listened to."
- Staff told us they also felt listened to on both a professional and personal level. They told us their thoughts and opinions were valued.

Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People received person-centred care which supported good outcomes for them. Each person's care plan was unique to them, and staff worked and supported each person to live the best life they could. Staff told us, "Thornhill is a good place for people to live. We provide person-centred care, and this is because a good staff team equals good care."
- Relatives and a professional involved with the service, told us people received good care. They told us, "[Person's name] is so happy living at Thornhill. Staff take their cue from how [person's name] is feeling", and "I spoke to [deputy manager's name], he was incredibly helpful and knowledgeable about the client. Staff are very invested in the welfare of the clients there."

Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed

- The registered manager had submitted appropriate documentation to the Care Quality Commission in line with regulatory requirements.
- The registered manager and provider had completed various audits to ensure the quality of care provided was at a good level.
- Staff told us they felt confident to carry out all aspects of their role. They told us they felt supported by the management team at the service.