

#### Autism.West Midlands

# Wagstaff Way

#### **Inspection report**

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#### Ratings

Overall rating for this service	Good •
Is the service safe?	Good •
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

## Summary of findings

#### Overall summary

This inspection took place on 12 September 2017 and was announced.

Waystaff Way provides care and accommodation for up to four people with a diagnosis of a learning disability or autistic spectrum disorder. At the time of our inspection visit three people were living at home.

At the last inspection on 17 June 2015 the service was rated overall as Good with the key question 'effective' being rated as Requires Improvement. At this inspection we found improvements had been made and all areas were rated 'Good'.

There was a registered manager at the home who had been in post since August 2017. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At our previous inspection we found the form used to assess people's capacity to make decisions was not fit for purpose because it did not reflect current legislation. During this inspection we found the form had been updated.

People made day to day decisions about their care which staff respected. People enjoyed their meals and liked the food choices available to them. People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the home supported this practice.

Previously we found staff had not completed all of the training the provider considered essential. At this inspection we saw staff training was up to date. This meant staff had the skills they needed to meet the needs of people who lived at the home.

People told us they felt safe living at Wagstaff Way and relatives agreed with them. Staff understood risks related to people's care and support and their responsibilities to protect people from the risk of abuse. People's medicines were managed and administered safely by trained staff. People were supported to access health care services when needed.

The provider checked staff's suitability for their role before they started working at the home. There were enough staff to support people to meet their needs, in the ways they preferred. People's care and support was provided by a consistent staff team who knew people well. Relatives thought staff were dedicated, caring, knowledgeable and kind.

People and their relatives were involved in planning and reviewing their care. Information in care records

ensured staff had the detail needed to ensure all care and support provided was based on the individual needs and preferences of each person.

People were supported to maintain relationships with people who were important to them and were encouraged to follow their interests and take part in activities which they enjoyed. People enjoyed spending time with the staff who cared for them. Staff respected people's privacy and promoted their dignity by supporting people to be independent.

Relatives knew how to make a complaint and told us they would feel comfortable doing so. No complaints had been made since our previous inspection.

Relatives were very complimentary about the quality of care provided and the way the home was managed. Staff enjoyed working at the home and felt supported by the management team. The management team completed regular checks to monitor the quality and safety of service provided, and encouraged people and relatives to share their views about the service to drive forward improvements.

Further information is in the detailed findings below.

## 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 remains Good.	
Is the service effective?	Good •
The service was effective.	
People were supported by staff who had completed an induction and on-going training to provide effective care to meet their needs. The management team and staff understood the principles of the Mental Capacity Act 2005 so people's rights were protected. People received food and drink which met their nutritional needs and were supported to access to healthcare services when needed.	
Is the service caring?	Good •
The service remains Good.	
Is the service responsive?	Good •
The service remains Good.	
Is the service well-led?	Good •
The service remains Good.	



## Wagstaff Way

**Detailed findings** 

#### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection visit took place on 12 September 2017 and was conducted by one inspector. It was a comprehensive, announced inspection. The provider was given 24 hours' notice because the location is a small care home for adults with a learning disability who are often out during the day; we needed to be sure that someone would be in to talk to us.

Before our inspection we looked at information received from the local authority commissioners and the statutory notifications that the registered manager had sent us. A statutory notification is information about important events which the provider is required to send to us by law. Commissioners are people who contract service, and monitor the care and support the service provides, when services are paid for by the local authority. Commissioners told us they had no feedback they needed to share with us about the service.

We also reviewed 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. We found the PIR reflected the service.

During our inspection visit we spoke with all of the people who lived at the home. One person told us what it was like to live at Wagstaff Way. Other people were unable to tell us, in detail, about their experiences of their care, so we spent time observing how their care and support was delivered.

We spoke with the four support workers, the team leader, the registered manager and the operations manager. We looked at a range of records about people's care including two care files and daily records to assess whether people's care delivery matched their records. We looked at three staff files to check they had been recruited safely and trained to deliver the care and support people required. We reviewed records of the checks the provider and management team made to assure themselves people received a quality

service.
The day after our visit we spoke with three people's relatives via the telephone to gather their views about the home.



#### Is the service safe?

## Our findings

At this inspection, we found people continued to be protected from abuse and harm. This meant the rating continues to be Good.

People and relatives told us they felt safe living at Wagstaff Way. One person indicated they felt safe by giving us a 'thumbs up' sign. A relative explained their family member felt 'confident and secure' living at the home because staff provided the 'reassurance' the person needed.

Prior to staff starting work at the home, the provider checked their suitability to work with the people who lived there. Staff had background checks completed and two references were sought before they were able to begin work. We checked three staff files and saw these checks had been completed.

There were enough skilled and experienced staff on duty to support people safely. People received their care and support from an established, dedicated and consistent staff team who knew the people they supported well. One staff member said, "We work flexibly and cover for each other. They [people] don't like change. Working flexibly provides stability and routine which is really important for people with autism."

Staff knew how to protect people from the risk of abuse. Staff had attended safeguarding training which included information about how to raise issues with the provider and other agencies. One staff member said, "Whilst I'm confident [team leader] would deal with things, if I thought they hadn't I would escalate it."

There was a system in place to identify risks and protect people from harm. Risk assessments and management plans were in place which provided staff with the information they needed to provide care in the safest possible way. Staff knew about the risks associated with people's care needs and the actions they needed to take to keep people safe.

The home was overall well maintained. Areas requiring attention for example, replacement carpet on the stairs had been identified and quotes were being obtained. Records showed safety checks had been carried out to assure the provider that fire prevention systems, and gas and electrical items were fully working and safe to use. Fire and evacuation procedures were in place for everyone at the home. However, these were not easily accessible to staff and the emergency service. The operations manager began to address this during our visit.

We saw medicines were managed, stored, administered and disposed of safely. We reviewed two people's medicines administration records, which had been completed in accordance with the provider's policy and procedures. Where people's medicines were prescribed on an 'as required' basis there was clear guidance for staff to follow. Staff completed training before they administered medicines and regular checks took place to ensure they remained competent to do so.



#### Is the service effective?

#### Our findings

At our previous inspection 'effective' was rated as Requires Improvement. This was because the provider's form used to assess people's capacity to make decisions did not reflect legislative requirements and staff training was not up to date. At this inspection visit we found improvements had been made. The rating has changed to Good.

We saw the provider had reviewed and updated their 'Mental Capacity and Deprivation of Liberty (DoLS)' policy and supporting documentation, including the assessment of capacity form in July 2016. The assessment now reflected the correct criteria for making a DoLS application.

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 Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We found the rights of people who lived at the Wagstaff Way were protected. The management team had made two DoLS applications to the local authority (supervisory body) because people had restrictions placed on their liberty to ensure their safety. A relative told us they had been consulted when staff had assessed they needed to apply for a DoLS for their family member.

Care records contained information about people's capacity to make decisions. However, where people had been assessed as not having capacity to make certain decisions the instructions about how decisions were to be taken in the person's best interests were not clear. We discussed this with the operations manager who assured us this would be addressed. Despite omissions in records staff had a good knowledge of when and who could make decisions in a person's best interests.

The registered manager and staff understood their responsibilities under the Act. We saw people were supported to make decisions and choices. People's individual communication methods were understood by staff who were able to interpret people's choices and decisions. Staff asked people for their consent and made sure people were happy before providing any support.

Previously we identified on-going training which the provider considered essential was overdue for most of the staff. Ensuring staff training is up to date is necessary to ensure staff skills are maintained and their work reflects best practice.

During this inspection records confirmed staff training was up to date. The training staff had received was linked to the needs of the people they cared for, and included training and advice from health professionals to ensure people's needs were met.

Relatives told us staff had the knowledge, 'attitude' and 'caring approach' they needed to meet people's needs. One said, "The staff are very skilled. It is clear they have been trained." Staff spoke positively about

the training they received and said this assisted them to meet people's needs effectively. One staff member said, "Refresher training is really important because things change all the time. You think you know it and then you do the training and learn something new."

New staff were supported to understand their roles and the needs of the people they cared for through an induction programme. A recently recruited staff member explained their induction had included working alongside more experienced staff and completing the Care Certificate. The Care Certificate is expected to help new members of staff develop and demonstrate key skills, values, knowledge and behaviours, enabling them to provide people with safe, effective, compassionate, high-quality care.

People were involved in menu planning. We saw they enjoyed the mealtime experiences and they could access drinks and snacks when they wanted to.

People were supported to attend health care appointments when needed. One relative said, "We are always kept informed if [name] has an appointment and the outcome. Communication from the staff is very good. It's one of their many strengths."



## Is the service caring?

#### Our findings

At our previous inspection we found the service provided was caring, and at this inspection it continued to be. The rating continues to be Good.

The atmosphere at Wagstaff Way was homely and calm and the relationships between people and the staff who cared for them was friendly.

People were very comfortable with staff and enjoyed spending time talking and engaging in activities with them. Relatives described staff as dedicated, caring, knowledgeable, friendly and kind. One relative told us, "The staff are excellent." Staff were attentive and showed people patience and respect. The registered manager told us, "One of our teams strengths is they work in a very person centred way and are committed to the people they support."

Staff told us they 'loved' working at Wagstaff Way and took pleasure in their roles because they felt they made a difference to people's lives. One staff member said, "We do everything to ensure they [people] have a fulfilling life. Just to see that smile on their face makes it worth it." They went on to described the 'immense' job satisfaction felt by the 'whole staff team' when one person who had lived at the home was able to move on to live independently.

Staff treated people with dignity and respect by promoting them to be as independent as possible. A relative told us, "[Name] is very good at doing some things and staff really encourage and respect that." We saw staff supporting and guiding people with their laundry, laying tables, making drinks and preparing food.

People made everyday decisions and staff respected the decisions people made. For example, during the morning of our visit people chose to go out with staff for a game of bowls. In the afternoon one person spent time completing household tasks whilst another person chose to spend time on their iPad.

Throughout our visit people moved around their home freely or choose to have quiet time by themselves. One person invited us into their bedroom. Their room was personalised with photographs and treasured items. The person told us they had chosen the décor for their room. They said, "It's amazing." We saw staff knocked on people's bedroom doors before announcing themselves and waited to be invited in. This demonstrated staff understood the importance of respecting people's privacy.

Staff had cared for people living at the home for a number of years, and told us this helped them to know people well. People were assigned a specific member of staff called a keyworker who were responsible for maintaining a special relationship with the person they supported, ensuring their social and practical needs were met. One person told us who their keyworkers was and understood they could talk to them if they needed anything.

People were supported to maintain relationships which were important to them. One person made weekly visits to their family home which they told us they 'enjoyed'. Staff supported another person to keep in touch

with their family through 'skype' calls. All of the relatives we spoke with felt they could visit the home at 'an time' and were 'always' made to feel very welcome.



## Is the service responsive?

#### Our findings

At this inspection, we found people continued to receive care that was personalised and staff were as responsive to people's needs as they were during the previous inspection. The rating continues to be Good.

Relatives told us staff met and respond to people's changing needs because they knew people well. Comments included, "Staff really understand [name] and what's important to her which is why she is so happy at Wagstaff.", and, "Staff can respond because they know the signs when [name] is happy or sad or anxious."

People and staff had developed meaningful relationships. Staff demonstrated a detailed knowledge and understanding of each person's diverse support needs and personal preferences. We saw staff responded to people's requests for assistance and support immediately. Staff anticipated people's needs at certain times of the day, including when people might want to have a chat or have quiet time away from other people.

Care records were centred around people's needs. They provided information about the person's life history, their values, likes and dislikes, the level of support needed and how they wanted to receive care. Staff told us they had time to read care plans but because they knew people well they did not need to refer them on a daily basis. One staff member said, "We keep up to date with any changes because we have a handover when we come on shift and read the communication book." Information recorded in the communication book confirmed this.

Care records were up to date and showed the inclusion of people, their families and those people involved in the person's care to ensure they continued to meet people's needs. One relative told us, "The home keeps us updated and we are very much involved in [names] care." During our visit we heard the team leader arranging a convenient time and date for a relative to attend their family members review meeting. People's care records were stored securely, which ensured personal information was kept confidential.

Relatives had no concerns or complaints and told us they would speak to the team leader if they needed to. One relative said, "I am absolutely confident [team leader] would listen and respond." There was a complaints procedure which informed people and visitors how they could make a complaint and how this would be managed. However, the procedure was not available in user friendly formats to meet the different communication needs of people living at the home. The operations manager told us they would address this. Records of individual and group meetings with people demonstrated staff worked closely with people so they had a good awareness of any issues or concerns people had. No complaints had been received since our last inspection.

People were supported to maintain hobbies or activities they enjoyed. We saw people chose how to spend their time. For example, one person spent time with staff playing card games and drawing pictures. Another person told us they were looking forward to their 'pamper session' which was planned for later in the day. People were also supported to go on holidays of their choice and had just returned from Lanzarote which one person described as, "lovely."



#### Is the service well-led?

#### Our findings

At our previous inspection we found the home and staff was well-led, and at this inspection it continued to be. The rating continues to be Good.

Relatives were very complimentary about the way the home was managed and the service provided. One told us, "Wagstaff Way is wonderful. We are so lucky to have found it. We couldn't ask for better." Another explained they were invited to comment on the service provided and suggested improvements in a yearly survey. They said, "I can honestly say to you, I could not think of any ways in which the home could, or needed to improve."

The service had a registered manager. They had been in post since August 2017 and were still familiarising themselves with the home. They said, "There is a very committed and experience team here and I will be building on that as well as looking for innovative ways of working. Our priority is to make sure people are happy and fulfilled."

The registered manager was also registered to manage two of the providers other homes and divided their time equally across the three services. They told us they were always available to support staff by telephone at other times. In their absence the team leader managed the day to day running of the home.

The team leader demonstrated an extensive and detailed knowledge of people living at the home, and advised staff on people's care needs. They worked alongside staff regularly, and this meant they were aware of the challenges faced by staff and they could make sure staff felt well supported and confident. A relative told us, "[Team leader] is wonderful and always makes herself available if you need to talk."

Staff told us the management team were approachable and available when they needed them. In addition to daily contact staff were supported through regular individual and team meetings. One staff member said, "We can speak openly and honestly in meetings. We always talk through any disagreements because we [management and staff] share the same ethos and values. The girl's [people] come first."

The management team conducted regular audits and checks of the quality of the service. They checked people's care plans were regularly reviewed and up to date, that medicines were administered safely and that the premises and equipment were safe, regularly serviced and well-maintained. We saw checks identified areas where improvement was needed and records showed when these had been completed. This ensured the service continuously improved.

The registered manager understood their responsibilities and the requirements of their registration. For example, they had submitted statutory notifications to inform us about important events and incidents and had displayed their latest CQC rating in the home. The provider had also added a link on their website to the homes CQC inspection report. This ensured the public had information about the homes rating which is a legal requirement.