

Expect Ltd

Expect Limited - 13 Elm Road

Inspection report

13 Elm Road
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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

13 Elm Road is a residential care home for up to 3 people with learning disabilities and/or mental health needs. The home is a large terraced house in a residential area, with community facilities including shops, cafes and good access to local transport.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and on-going monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

At this inspection we found the service remained Good.

Why the service is rated Good.

Risk assessments were in place specific to people's individual needs.

Medicines were managed safely and people received their medicines as prescribed.

Staff had been appropriately recruited to ensure they were suitable to work with vulnerable adults. There was sufficient staff on duty to meet people's needs. The staff team provided consistent support to people, as most had worked in the home for a few years and they provided cover for each other for holidays and sick leave.

The home was well maintained and in good decorative order. Measures were in place to ensure the environment was safe and suitable for the people who lived there. Repairs to the building were reported to the landlord and attended to in a timely way.

People's needs were assessed and care plans were completed to demonstrate the support required. People's health care needs were addressed. People saw their local health care professional when they needed to.

Staff received a programme of mandatory and optional training relevant to the people they supported. Regular supervision and annual appraisals took place. Staff meetings were held to keep staff informed and support them in their role.

People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. People made decisions and choices in relation to their care, support received and daily activities.

Staff knew the people in the home well, particularly their needs and choices and how they preferred to be

supported. This information was well documented to assist new staff.

Staff knew people's dietary needs and preferences. They supported people to eat and drink enough to maintain a balanced diet.

Staff showed kindness towards the people in the home. People were supported to maintain their independence with activities of daily living. People went out when they chose to and were supported by staff to attend health appointments.

Care plans were written for the individual and informed staff of their preferences and wishes. These documents were regularly updated to reflect people's change in need or preference.

People enjoyed a range of activities, including their hobbies. Staff made sure they had what they needed to complete the activity, such as flowers, paper, crayons and books.

A complaints policy was in place and displayed in the home. No complaints had been received since the last inspection in 2015.

There was a person-centred and open culture in the home. Staff reported that registered manager was supportive and made themselves available to support staff when they needed it. Staff worked as a team and supported each other. Absence and annual leave was covered by the staff team. This ensured there was a consistent staff team that people in the home knew and staff were familiar with their support needs.

Quality assurance and governance systems were in place to help the registered manager and provider to monitor standards and drive forward improvements.

The registered manager and provider met their legal requirements with the Care Quality Commission (CQC). They had submitted notifications relating to incidents and the rating from the last inspection was clearly displayed.

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 remains Good.

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.

Expect Limited - 13 Elm Road

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.

This was a comprehensive inspection.

This inspection took place on 13 February 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because the location was a small care home for adults who are often out during the day and the registered manager was not based at the location. We needed to be sure that they would be in.

The inspection team consisted of an adult social care inspector.

We reviewed the information we held about the service before we carried out the visit. We collated information we had about the home. Prior to the inspection the provider had submitted a Provider Information Return (PIR) to us. The PIR is a document the provider is required to submit to us which provides key information about the service, and tells us what the provider considers the service does well and details any improvements they intend to make.

We contacted the local authority commissioning team for feedback about the service.

During the inspection we used a number of different methods to help us understand the experiences of people who lived at 13 Elm Road. This was because the people who lived there communicated in different ways and we were not able to directly ask them their views about their experiences. We spent a short time observing the support provided to help us understand people's experiences of the service. Our observations showed people appeared relaxed and at ease with the staff.

We spoke with three staff, including the registered manager.

We looked at the care records for three people, as well as medication records, three staff recruitment files and other records relevant to the quality monitoring of the service. These included safety audits and quality audits. We undertook general observations and looked round the home.

Is the service safe?

Our findings

There were robust measures in place to ensure people were safe. We saw through people's body language that people were comfortable with the staff. Risk assessments were in place specific to their individual needs, any behaviour they may present and detailed how staff should support people to keep them safe. Risk assessments included mobility and personal care.

Staff had received training in safeguarding adults from abuse and were able to tell us what they would do if they saw or suspected abuse. There was sufficient staff on duty to meet people's needs. People required staff support to access the community and take part in activities. Staff were provided to enable them to do this and keep safe. Any additional cover that was required to cover staff sickness or leave was provided by the existing staff team to provide consistency for the people living the home.

Medicines were managed safely and people received their medicines as prescribed. Staff had been trained to administer medicines in order to ensure errors were kept to a minimum.

We looked at how staff were recruited and the processes undertaken. We found copies of application forms and references and found that Disclosure and Barring (DBS) checks had been carried out at the start of a person's employment and every three years thereafter. This meant that staff had been appropriately recruited to ensure they were suitable to work with vulnerable adults.

The home was well maintained and in good decorative order. People's bedrooms were personalised. We found the home clean with no odours. A cleaning rota was in place to maintain good standards of cleanliness.

Measures were in place to ensure the environment was safe and suitable for the people who lived there. Repairs to the building were reported to the landlord and attended to in a timely way. Regular checks and tests, such as gas, electricity, water safety, fire drills and external checks of fire fighting equipment, were completed to maintain safety in the home.

Is the service effective?

Our findings

People's needs were assessed and reviewed regularly to reflect people's current health and support needs.

We saw from the training records and from conversations we had with the staff that they had the skills, knowledge and experience to support people effectively and safely. The provider had developed a computerised system to help ensure staff received regular training. Staff were given the time to complete the required training courses. Staff were supported by the registered manager through regular supervisions and an annual appraisal. Staff meetings were held regularly.

The service took an individualised approach to meal provision. We saw that people received their choice of meals and staff supported people to eat healthy and balanced diet. A record was kept of people's weekly meals to evidence this.

People were supported to maintain healthy lives. Appointments were made regularly to visit the GP, dentist, optician and a chiropodist to help to maintain good health.

The home had been adapted to meet people's individual needs; equipment to support people with poor mobility was in place in the bathrooms. There was a bedroom on the ground floor and a stair lift in place to access the first floor. People's bedrooms were decorated to their individual taste.

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. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The registered manager was fully aware of the process and one application had been made to the local authority. People living in the home were able to make decisions regarding their day to day choices.

Is the service caring?

Our findings

We saw that the staff showed kindness towards the people in the home. It was clear from the banter and laughter that people were comfortable with staff and enjoyed their support.

Staff supported people to make decisions about their care, support and treatment. Staff showed a good understanding of people's likes and dislikes. This information was recorded in care records.

People's privacy was respected; people could enjoy time on their own when they preferred. Staff checked them regularly. Some people were supported to maintain relationships with their family members. The local advocacy service had been involved with a person who did not have any family to support them.

People who expressed a wish were supported to enjoy a holiday at least once a year. Destinations were chosen with everyone's support needs and favoured activities in mind. For example, one person told us where they wanted to go on holiday this year and that they were going with a friend, as well as staff.

Where possible people were supported to maintain their independence with activities of daily living (personal care, cleaning, laundry, shopping).

Is the service responsive?

Our findings

People received personalised care that was responsive to their needs. Care plans were written for the individual and informed staff of their preferences and wishes. The care plan documents were regularly updated to reflect people's change in need or preference. The two people living in the home were supported as individuals and in a way they wanted.

People were supported to take part in activities they enjoyed, such as flower arranging, art and craft, music and watching their favourite TV programmes. People were able to access the community to buy personal items and to go for lunch. They were supported to attend health appointments.

The provider had a complaints policy in place. People in the home spent time with staff to discuss any new things or changes they wanted. No complaints had been received since the last inspection in 2015. The policy was displayed in the home. One social care professional told us, "Expect are one of the local authority's larger providers. We have a lot of [Name of local authority] funded service users supported by this provider who deliver good services to this client group. Our records show there has not been any issues raised about this provider in the last two years."

Is the service well-led?

Our findings

There was a registered manager in post. They were not based at the location. 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.

From discussions we had with the registered manager and the staff we found that they were committed to providing a high quality and person-centred service at the home for the individuals who lived there. For example, staff supported people to enjoy holidays and activities and to maintain their hobbies.

Staff reported that registered manager was supportive and made themselves available to support staff when they needed it. Staff worked as a team and supported each other.

Feedback was taken each year from the users of Expect Limited's services and all staff. It was not possible to see feedback just relating to this service. However feedback from staff showed that 88% loved their job, 87% said their managers were open and honest and 92% felt part of a team and got the right support from their manager.

We looked at the governance arrangements to monitor standards and drive forward improvements. Quality assurance and governance processes are systems that help registered providers to assess the safety and quality of their services, ensuring they provide people with an effective and safe service. A number of audits were completed by the support staff, registered manager and nominated senior care staff which included, medication, care records and health and safety. The registered manager completed a report on all aspects of the service each three months.

The registered manager and provider met their legal requirements with the Care Quality Commission (CQC). They had submitted notifications relating to incidents and the rating from the last inspection was clearly displayed.