

Teddy's Haven Ltd

Teddy's Haven

Inspection report

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Date of inspection visit: 09 March 2022 11 March 2022

Date of publication: 24 March 2022

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

Teddy's Haven is a supported living service, supporting people with mental health support needs in their own home.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of inspection, one person was receiving personal care within the service.

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

We were not always assured that training undertaken by staff met Care Certificate Standards. We have made a recommendation about the training and induction offered to staff working at the service.

People received safe care and were protected against avoidable harm, abuse, neglect and discrimination. There were systems and processes in place to safeguard people from potential harm. Staff completed training about safeguarding people from harm and knew how to report abuse

There were sufficient numbers of staff to meet people's needs safely. People were supported by staff who knew them and their needs well. The provider had followed their recruitment practices to ensure people employed were suitable to work at the service and support people.

Medicines were administered safely by trained staff.

Where the provider took on the responsibility, people were supported and encouraged to maintain good nutrition and hydration.

People told us they were treated with respect. Staff encouraged people to maintain their independence and do as much for themselves as they were able to.

People were involved in the care planning and reviews of their care. The provider had a complaints procedure which was accessible to people using the service. There had not been any complaints received at the time of our inspection.

The registered manager and provider understood their responsibilities and worked in an open and transparent way.

The provider conducted regular checks to ensure any issues were found and resolved.

People were supported to have maximum choice and control of their lives and staff supported them in the

least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk Why we inspected

This service was registered with us on 19 October 2020 and this is the first inspection

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.	



Teddy's Haven

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 9 March 2022 and ended on 11 March 2022. We visited the location's office on 9 March, and the supported living location on 11 March.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

What we did before inspection

In planning our inspection, we reviewed information we had received about the service. This included any notifications (events which happened in the service that the provider is required to tell us about) and feedback from the local authority.

During the inspection

We spoke with one person that used the service. We spoke with 2 staff members and the registered manager. We reviewed a range of records. This included one person's care records and risk assessments. We looked at two staff files in relation to recruitment and staff supervision. We reviewed a variety of records relating to the management of the service, including training records and quality assurance records.



Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe using the service. One person told us "I feel very safe here, I am a lot happier here than I was at my last place."
- The provider had systems in place to safeguard people from abuse and knew how to follow safeguarding protocols when required.
- Staff knew how to recognise abuse and protect people from the risk of abuse. They understood how to report any concerns if they needed to by following safeguarding or whistleblowing procedures.

Assessing risk, safety monitoring and management

• Detailed risk assessments were in place that covered any risks present in people's lives. This included the risks around people's mental health, day to day living activities, and activities which promoted people's independence in a safe manner. Staff we spoke with felt safe supporting people and understood the measures in place to keep people safe.

Staffing and recruitment

- The supported living service was staffed 24 hrs a day. People told us that staff were always around, and they got the support they required.
- •Suitable recruitment procedures were in place. Pre employment checks had been carried out such as identity checks, right to work checks, and disclosure and barring (DBS) checks.

Using medicines safely

- •People were happy with the support they received with medicines. One person told us they were supported by staff to take medicines daily, as well as speak to medical professionals to ensure this was monitored.
- Systems were in place to ensure that medicines were safely administered by staff who were trained to do so.

Preventing and controlling infection

• Staff told us they had enough Personal Protective Equipment (PPE) to safely work within the service, and had been trained in infection control.

Learning lessons when things go wrong

•The service had systems in place to monitor incidents and accidents so action could be taken to promote people's safety. The registered manager understood how to use the information as a learning opportunity to

try and prevent reoccurrences.



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.

This is the first inspection for this newly registered service. This key question has been rated Good: This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- We were not always assured that staff training was of a sufficient standard. It is expected that the provider follow the Care Certificate Standards when providing training for staff. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- On induction, staff were completing up to 24 courses in one day. We spoke with the registered manager about how much content and quality each course could have, when so many were covered in such a short period of time. The registered manager told us that additional informal 'in house' support and guidance was given to staff within the supported living setting, after the formal training.
- People using the service had mental health support needs. There was no formal training in supporting people with mental health conditions.
- Staff we spoke with were knowledgeable, and we found no concerns around competency of staff working with people. The service was small and the registered manager was a mental health nurse who gave staff guidance and support.

We recommend the provider consider reviewing the training and induction packages being offered, to ensure they meet the Care Certificate Standards, and include training in the specific needs of the people using the service.

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

• The registered manager, who was also a registered mental health nurse, carried out full needs assessments with people before they began being supported by the service. We saw that assessments contained a detailed account of a person's needs, including any continued mental health support needs they had with medical professionals.

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

• The staff supported and encouraged people to maintain a healthy diet. Minimal support was required in this area at the time of inspection. One person told us, "I get support to do the shopping, and I get to eat the food that I like."

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

•People experienced positive outcomes regarding their health and wellbeing. Staff had effective working

relationships with a range of outside professionals to support them in the provision of effective care and support. This included GP's and other professionals that supported people with mental health needs.

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 MCA 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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

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's mental capacity had been considered in line with guidance for relevant decision-making processes. Staff had completed training in relation to the MCA.



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.

This is the first inspection for this newly registered service. This key question has been rated Good: This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were treated in a kind and caring manner by staff, One person told us, "There are always staff around to help, they sleep here as well. I don't feel restricted in any way. The staff talk to me nicely, they respect me." The staff we spoke with, spoke about people in a positive and respectful manner. One staff member said, "[Name] needs to feel free. We keep our distance when they need it, and respect their wishes."
- Staff we spoke with understood people's backgrounds and cultures, and supported people to maintain their independence as much as was possible.

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

- People were supported in a positive manner, and were given the time they needed to talk and express themselves. Staff we spoke with understood people's communication styles, and helped people make decisions daily. Care plans we saw captured people's own voice and opinion.
- One person we spoke with told us they were involved in their own care, and felt in control of the decisions in their life.

Respecting and promoting people's privacy, dignity and independence

- People we spoke with confirmed that staff were respectful of privacy and dignity when undertaking care tasks within their home.
- People's personal information was not shared inappropriately. People's personal information was stored securely at the office location. Staff were aware of keeping information safe and data protection.



Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good: This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received person centred care from staff. Care plans we looked at contained personalised information such as a description of 'What a good day looks like', alongside information around personal history, likes and dislikes, and family history. Plans included prompts for staff to encourage independence with tasks wherever possible.
- Staff we spoke with, including the registered manager, had excellent knowledge of the people they were supporting. They understood the specific needs of people, and the way in which they wanted to be supported. One staff member told us, "Familiarity with me is important, like a friend, [Name] will open up and feel comfortable."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

• The registered manager said they could make information available in formats people could easily understand if and when required.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

• People were supported to be as independent as possible, and take part in the activities that were of interest to them. We saw that one person enjoyed regular bus travel, so was supported to understand local bus routes and travel around safely. Information about the things they liked and disliked, were documented in their care plan.

Improving care quality in response to complaints or concerns

• A complaints system and policy was in place, but no complaints had been made. The registered manager explained how any complaints would be dealt with formally, investigated, and responded to.

End of life care and support

• No end of life care was required at this service.



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.

This is the first inspection for this newly registered service. This key question has been rated Good: This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and staff all had good knowledge and understanding of the people they were supporting, and knew them well. Staff all had a positive manner and outlook towards the support and work they completed.
- •Staff told us they were happy working at the service and felt supported by the registered manager. One staff member said, "The registered manager is very quick to respond, good communication."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

•The registered manager understood information sharing requirements, and knew that when concerns had been identified, appropriate notifications should be sent to the CQC and the local authority as required by law.

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

- •Audits and checks were taking place by the registered manager. Some checks on documentation were not always recorded, to evidence they had taken place and actions taken. The registered manager told us they would begin recording these checks and formalising them. The service was small, and staff told us the registered manager was regularly on site, checking processes and documentation.
- The registered manager understood their responsibilities to notify CQC and other relevant authorities of any incidents which took place that affected people who used the service.

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

- People and their relatives were involved in the service, and able to feedback and comment. One way this was captured, was through a feedback questionnaire. We saw that feedback received was positive.
- Staff felt well supported and involved in the running of the service. One staff member said, "We have team meetings, everyone is able to voice their opinion." We saw minutes of meetings that showed topics such as training and person centred care were discussed.

Continuous learning and improving care

• Spot checks on staff were taking place to monitor how they were providing care, their timeliness and

professionalism. This included spot checks at night to check on night staff. Staff we spoke with told us they were regularly checked on and given the support they required.

Working in partnership with others

•We saw documentation that showed the service was in regular contact with other health and social care professionals to support people's ongoing needs.