

Allen and Whitworth UK Ltd

Allen and Whitworth UK Limited - 71 Allen Road

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

Allen and Whitworth UK Limited – 71 Allen Road, provides support for up to three people with Learning Disabilities. At the time of the inspection there were three people living at the home. At the last inspection in October 2015, the service was rated Good. At this inspection we found that the service remained Good.

There was a registered manager in post. 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.

People continued to receive care that was safe. We saw that staff had been appropriately recruited in to the service and security checks had taken place. There were enough staff to provide care and support to people to meet their needs. People were consistently protected from the risk of harm and received their prescribed medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision, training and on-going professional development that they required to work effectively in their roles. People were supported to maintain good health and nutrition .

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service support this practice.

People told us their relationships with staff were positive and caring. We saw that staff treated people with respect, kindness and courtesy. People had detailed personalised plans of care in place to enable staff to provide consistent care and support in line with people's personal preferences.

People knew how to raise a concern or make a complaint and were confident that if they did, the management would respond to them appropriately. The provider had effective systems in place to manage any complaints that they may receive.

The service had a positive ethos and an open and honest culture. The registered manager and deputy manager were present and visible within the home .
Established quality assurance systems were used to monitor the service to continually drive improvement.

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 safe.

Is the service effective?

Good ●

The service remains effective.

Is the service caring?

Good ●

The service remains caring.

Is the service responsive?

Good ●

The service remains responsive.

Is the service well-led?

Good ●

The service remains well led.

Allen and Whitworth UK Limited - 71 Allen 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 inspection took place on 3 October 2017 and was unannounced.

The inspection was carried out by one inspector.

Before the inspection, the provider completed a 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. The provider returned the PIR and we took this into account when we made judgements in this report. We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. This included the local authority who commissioned services from the provider.

We spoke with one person who use the service, and observed one person who was non-verbal interact with staff. We also spoke with one staff member, and the registered manager. We reviewed three people's care records to ensure they were reflective of their needs, three staff files, and other documents relating to the management of the service.

Is the service safe?

Our findings

People told us they felt safe. One person said, "Yes I feel safe here." Recruitment processes in place were safe and ensured that only people suitable to the role were employed. Security checks took place for all staff.

People said that there was always staff around when needed. We saw that the service had one member of staff on shift at all times and rotas showed that this was consistent. Risk assessments were in place to cover all the risks present within people's lives. These included both proactive and reactive strategies for staff to support people whose behaviour may at times challenge. We saw that risk assessments were positive in their nature and enabled people to be independent and safe. For example risk assessing a person's ability to go out in the community alone, without staff support. The staff we spoke with were confident that the risk assessments in place kept people safe and helped them support people in a positive manner.

Staff were knowledgeable about safeguarding procedures and how to keep people safe. One staff member told us, "I would speak to the manager immediately or the police if it was required. I record everything in detail." The registered manager was aware of the need to notify CQC of any incidents as required.

People told us they were happy with the support they received to take any prescribed medicines. We saw that medicines were stored appropriately in a locked cabinet. All documentation relating to medicines and their administration was completed accurately.

Is the service effective?

Our findings

Staff had an understanding of the needs of the people they were supporting. The staff we spoke with told us they felt enabled to support people effectively as the training provided was suitable to understand their needs. One staff member said, "The training is regular and very good."

Staff all went through an induction process to introduce them to the service and the people using it. We saw that induction checklists were kept to evidence that all staff had gone through the same procedure, and covered all the required areas of knowledge and training to support people appropriately. On-going training was provided to both refresh knowledge and to gain new skills.

All staff received regular supervision with the registered manager. We saw that detailed supervisions took place which reflected on practice, and created actions and goals for staff to work towards.

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. The procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS). The registered manager was able to demonstrate they worked within the principles of the MCA and there was satisfactory documentation to support this. We observed staff gain people's consent during our inspection.

People told us they enjoyed the food they were supported to make, and they were encouraged to maintain healthy lifestyles. One person told us, "I like the food; I get to eat the things I like." We saw that people had full choice over the food and drink they had.

People had the access to healthcare they needed. We saw that visits to health professionals took place, including appointments with the optician, psychiatry and dentist. People had detailed information within their care files, which documented their health needs and any treatment they were receiving.

Is the service caring?

Our findings

People told us they were supported by caring and friendly staff who treated them with respect. One person said, "I like the staff, yes they are kind." One staff member said, "The people living here have been here for many years. We know them very well and care for them a lot."

We observed that both staff and registered manager interacted with people in a positive manner, they knew them well and gave people the time needed to talk. People were clearly comfortable in the presence of staff and had a good rapport with the staff supporting them.

People's choices in relation to their daily routines and activities were listened to and respected by staff. One person said, "I have been out to day services today." We saw that some people chose to stay in bed, and others were up and getting ready to go out. Staff told us, "The people here are very independent, and we respect their wishes and routines."

People's privacy and dignity was respected by staff at all times. During our inspection, people were asked if it was ok to enter their rooms to show us around, and their wishes were respected. We saw that people had keys to their own rooms so they could lock them as and when they wanted to. We saw that instructions within care plans reminded staff to respect people's privacy at all times when supporting people.

Is the service responsive?

Our findings

We saw that care plans clearly documented people's choices and preferences and showed that people were involved in their own care planning. People had person centred plans which documented their likes, dislikes, hobbies and interests. People had signed their care plans to show they were involved with them, and information was recorded in accessible formats for people to understand. All the care plans we looked at had been regularly updated.

People were supported to take part in activities and socialise with others as they wished. We saw that people had a varied weekly calendar of activities, which included social activity, attending day services, and voluntary work placements. People told us they were able to go out whenever they wanted and were given support to access things as and when required. During our inspection we saw people come and go from the service as they wished, and staff were able to offer them the support they needed.

People knew how to make a complaint if they needed and were confident that their concerns would be listened to and acted upon. One person told us, "I do not have any complaints; I have not had anything to complain about." The provider had a complaints policy in place and all people spoken with understood the complaints process.

Is the service well-led?

Our findings

A registered manager was in post at the time of the inspection. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

The service had a positive ethos and an open culture. Staff spoke positively about working for the service and thought highly of the management and support in place. One staff member said, "It is a very small service, and everyone cares for everyone else. People have been here a long time, it's like a family, we all have a good time." The service had a 'sister service' of the same size located a short walk away, which also had three people living there. The staff team and management worked across both locations and considered it to be one service. During our inspection, we saw people from one service visiting the other one as it was located very close, and they were friends with the people at the service. The staff team were well aware of their duties and felt comfortable working across the services with all people, staff told us that management were always available for support and guidance.

Staff told us they were comfortable to voice any concerns they might have with management at any time. Team meetings were regularly held so that matters such as staff training, people's care plans, activities and general service updates were discussed. We saw minutes of meetings held, and staff confirmed the meetings took place regularly.

The registered manager conducted comprehensive audits across the service to manage quality and address concerns. We saw that audits took place in areas such as training, client files, complaints systems, and record keeping. We saw that when any areas for further improvement were identified, they were followed up and resolved in a timely manner by the registered manager.