

Altum Residential Care Ltd

Altum Spring

Inspection report

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Ratings

Overall rating for this service

Requires Improvement



Is the service safe?

Requires Improvement



Is the service effective?

Requires Improvement



Is the service caring?

Good



Is the service responsive?

Good



Is the service well-led?

Requires Improvement



Overall summary

This inspection was unannounced and took place on 5, 6 and 28 May 2015. This was the first inspection of this new service.

Altum Spring is registered to provide accommodation for up to four people young people between the ages of 15 to 19 years old who require support with personal care. There were two young people living at the home on the day of our inspection.

A registered manager was 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

We found four breaches in the Health and Social Care Act Regulations 2008 and two breaches in the Care Quality Commission (Registration) Regulations 2009 (Part 4). The breaches identified are as follows.

Although staff had received training in the use of physical intervention techniques those asked were unable to tell

Summary of findings

us clearly what the techniques were or explain how they were used. It is important that staff are clear about control and restraint measures to ensure that they act within the law.

Young people's risk assessments did not always keep pace with their changing risks. This means staff did not always have the correct information they needed to help keep young people safe.

Staff files showed that the recruitment procedures were not as robust as they should be.

Although staff had received some training to support people safely and effectively more was needed to ensure that staff providing care and support had the qualifications, competence, skills and experience to safely support them and protect their rights including the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS).

We saw that the home was using two names for the service, one of which was not identified on the home's statement of purpose. The statement of purpose is a legal document that sets out the home's aims and objectives.

Services which are registered with the Care Quality Commission are required to notify us about certain events and incidents that occur. From the records we checked we found that the registered manager had not always notified us about incidents that had happened at the home.

You can see what action we have required the provider to take at the back of the main report.

A young person we spoke with told us that they felt safe at the home. They said that they thought the service was "10 out of 10" in comparison to other services they had been placed in recently. Staff we spoke with told us they felt safe and comfortable working there.

There were enough staff on duty to support people to meet their needs and manage any risks.

We saw that systems were in place to ensure that medicines were safely administered.

The house was clean and tidy. Young people were encouraged to be involved in household tasks to increase

their daily living skills that would help towards their transition into independent living. Young people were able to choose the colours they wanted their rooms to be decorated in.

The young people who lived at the home had the capacity to make their own decisions about their day to day lives. A young person said "There are house rules that I have to follow but I also make choices too [outside my identified risks]."

Although support workers we spoke with had no previous experience of working with young people whose behaviours may challenge they spoke enthusiastically about working at the home. One staff member said "I absolutely love it."

The registered manager carried out an assessment and consideration was given to young people already living at the home when reaching a decision to agree that a new person could use the service.

A young person we spoke with told us that there was a house menu and they shopped locally. They told us "We eat healthy food and have a takeaway on Friday." We saw that there was plenty of food and drink available. The kitchen was always accessible to people.

Young people had access to psychological support to help them develop coping strategies to help reduce and manage their presenting behaviours.

The atmosphere at the home was calm and relaxed. We saw there were frequent and friendly interactions between people who used the service and the staff supporting them. A young person told us that they thought the staff were "Laid back and you could have a laugh with them." And confirmed "They know what they are doing. They are all kind."

The service had been looking at ways that technology could be used to support young people to express their feelings and communicate with others.

We saw that opportunities were provided to support young people to receive education and look at options for further training and employment.

Summary of findings

Young people were involved in a range of different activities both inside and outside the home depending on their individual needs and personal wishes. Young people also had contact with their families and friends as appropriate.

The registered manager was clear about the need to ensure the service was run in a way that supported young people's individual needs and promoted each person's right to lead their own life as safely as possible. A staff

member told us that the registered manager was "Very good" "Approachable and supportive." We saw positive feedback and compliments made by social workers that had been retained by the registered manager.

We saw that young people and staff were able to speak openly and freely with the registered manager in order to express their views and opinions. A young person told us that because the registered manager worked shifts "I have been able to get to know her. She is the best manager I have known and I can have a conversation with her" and "I wouldn't change anything and I would recommend it to another young person."

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Staff had received training in the use of physical intervention techniques. However they were unable to tell us clearly what these techniques were or explain how they were to be used to help ensure the safety of young people who used the service.

Young people's risk assessments did not always keep pace with their changing risks.

Staff files showed that the recruitment procedures were not as robust as they should be.

There were enough staff on duty to support people to meet their support needs.

Requires Improvement



Is the service effective?

The service was not always effective.

Although most staff had received mandatory training to support people safely, to ensure staff protect young peoples' rights training in the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS) for young people over 18 years old was needed.

An assessment was undertaken and consideration was given to young people already living at the home before agreement was reached that a new person could use the service.

Young people were encouraged to eat healthily.

Young people had access to psychological support to support them to develop coping strategies to help reduce and manage their presenting behaviours.

Requires Improvement



Is the service caring?

The service was caring.

The atmosphere at the home was calm and relaxed. We saw there were frequent and friendly interactions between people who used the service and the staff supporting them.

Young people who used the service were encouraged to become as independent as possible.

Good



Is the service responsive?

The service was responsive.

We saw that opportunities were provided to support young people to receive education and look at options for further training and employment.

Good



Summary of findings

Young people were involved in a range of different activities both inside and outside the home depending on their individual needs and personal wishes.

Young people had contact with their families and friends as appropriate.

Is the service well-led?

The service was not always well led.

The name of the home statement of purpose which is a legal document was not correct and we had not always been notified about events that had happened at the home, which are required by law.

Young people and staff were able to speak openly and freely with the registered manager in order to express their views and opinions.

Requires Improvement



Altum Spring

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 and to provide a rating for the service under the Care Act 2014.

Before our visit we asked the provider to complete a Provider Inspection Return (PIR) form and this was returned to us. 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 also reviewed all the information we held about the service including notifications the provider had made to us.

This inspection was unannounced and carried out by a adult social care inspector.

We visited the home on 5 and 6 May 2015 and spoke with a young person who used the service, the registered manager, a senior care worker, a team leader and two support workers. We also looked at a range of records relating to how the service was run; these included a person's care records and medication records.

On 28 May 2015 we returned to the home to check the staff recruitment and training files. We also spent time talking with the operations director about the service.

Is the service safe?

Our findings

A young person we spoke with told us that they felt safe at the home. They said that they thought the service was “10 out of 10” in comparison to other services they had been placed in recently.

We saw that the home had ‘house rules’ in place that could result in restrictions being enforced. One young person we spoke with said they had consented to a restriction being put in place around certain items being kept in their room. They said this restriction had been put in place to help them manage their behaviours that impacted on their health and well-being. We saw that rewards for positive behaviour were also given and these were recorded.

A young person told us “They are not dragging things on if there are problems with my behaviour” and “I trust the staff. I know they do it [put restriction in place] because they care about me.”

The term safeguarding is a word used to describe the processes that are in place in each local authority to help ensure people are protected from abuse, neglect or exploitation.

Staff told us they had received internal training in the safeguarding of children. This was confirmed by staff training records we looked at. Support workers we asked told us what action they would take if they witnessed an abusive incident or if a young person disclosed information of concern to them.

Staff members were familiar with the term whistleblowing in relation to witnessing poor practice by colleagues. A staff member told us they would raise any concerns with the registered manager or if necessary the local authority and CQC. They were confident they could raise any issues and discuss them openly with the registered manager and the registered provider.

We were aware that there had been a number of whistleblowing concerns that had been raised with us. The registered manager had immediately contacted the Local Authority Designated Officer (LADO) to discuss the concerns raised and carried out an investigation that included the young person’s social worker with the support of the registered provider.

Young people who used the service presented challenging behaviour at times which could involve physical

intervention techniques being used by members of the staff team. We were told this would only be used as a last resort to prevent the young person harming themselves and others. We saw that there was a record maintained of all restraints that had taken place and that following an incident we saw that ‘feelings’ work was undertaken to help support the young person recognise and understand the impact of their behaviours.

Staff had received training in the use of physical intervention techniques. However the senior staff members that we asked were unable to tell us clearly what the techniques were or explain how they were used. It is important that staff are clear about control and restraint measures to ensure that they act within the law.

This was a breach of Regulation 13 (4) (b) Safeguarding services users from abuse and improper treatment to ensure acts intended to control or restrain a person using the service are a proportionate to the risk posed to them and others.

We saw that security checks were carried out three times a day to ensure that items that may enable a young person to harm themselves were accounted for. Searches of young people’s bedrooms were also carried out by staff. We were told that staff carried the equipment they might need in an emergency.

Our observations in the premises identified a potential risk to young people. We raised this with the registered manager and on the telephone with the provider. However on our visit on 28 May 2015 we found that no action had been taken to address the risk. We spoke with a director of the company who told us that they would carry out a risk assessment and take any necessary appropriate action.

We saw that young people had high risk behaviours. We saw that there were numerous risk assessments in place for one young person whose care and support records we looked at. However changes in risk management could be fast moving and were only changed by the registered manager. This meant there could be times for example when the registered manager was off duty where the paperwork did not keep pace with the changing risk. We also discussed with the registered manager about archiving old risk assessments from the working file so that staff followed the correct instructions set out by the registered manager.

Is the service safe?

These were a breaches of regulation 12 (2) (a) (b) Safe care and treatment assessing risks to health and safety and doing all that is reasonably practical to mitigate any risks.

We talked with staff about the recruitment system at the home. They told us that they had completed an application form and Disclose and Barring Service (DBS) criminal records checks had been undertaken.

We looked at the recruitment files of two members of the staff team including identification and copies of staff member's qualifications. We saw that although most of the required information was available on the files, the full employment history of one staff member was not recorded. This meant that satisfactory verification where a person had been previously employed in a position whose duties involved work with children and vulnerable adults and the reason why the position had ended had not been checked. On the second recruitment file we could not see any evidence to support that verification had been sought from recent social care employers and confirmation of the reason for leaving.

The lack of a robust recruitment procedures was a breach of Regulation 19 Schedule 3 Fit and proper persons employed.

When we arrived at the home there were four members of the staff team on duty. One staff member was still at the home from the night shift. We were told that there was

always three people on duty and more if needed dependent on the staffing levels agreed with the placing authority for each young person. Because there had been a turnover of staff recently the home had used four regular agency staff members though the need for this had stopped recently as new support workers had been employed.

Staff were responsible for the administration of people's medicines. We saw that medicines were securely held and systems were in place to record what medication people had taken. We looked at the home's medicines records system for young people who used the service and found these were fully completed.

During the inspection we saw that the environment was clean and there were no malodours detected. A cleaning schedule was in place. Staff members were responsible for supporting young people to cook and clean to help them to maintain and develop their daily living skills for independent living.

Accident and incident records were maintained. We also saw records that showed that weekly health and safety checks of the environment were undertaken which included fire safety that included a fire drill once a month, hot water temperatures and also fridge and freezer temperatures. This should help ensure the safety of people who used the service and staff.

Is the service effective?

Our findings

The young people who lived at the home had the capacity to make their own decisions about their day to day lives. A young person said “There are house rules that I have to follow but I also make choices too [outside my identified risks].” We there were consent forms in place, for example, taking photographs and first aid treatment; however the records we saw were not always dated.

The Care Quality Commission is required by law to monitor the operation of the Deprivation of Liberty Safeguards (DoLS). We asked the registered manager what action they had taken to ensure people were not subject to unnecessary restrictions and, where necessary, what action the manager took to ensure that people’s rights were protected.

We were told that most young people who come to live at the home were admitted under the Children Act and were often Looked After Children (LAC) who were either on a care order or had agreed to a voluntary admission to the home. The Mental Capacity Act (MCA) also applies to young people who are 16 and 17 years old. At the time of our visit the MCA Code of Practice Chapter 12 How the Act applies to children and young people states that ‘there are no specific rules for deciding when to use the when to use either the Children Act 1989 or the MCA 2005. However health and social care workers should be aware of and their obligations to comply with the MCA.’

Some staff that we spoke with had received some MCA and Deprivation of Liberty training through previous health and social care employers and had some awareness of their legal responsibilities. Staff need to undertake training in the MCA and DoLS to ensure that young people of 16 years and older and in relation to DoLS eighteen years and older to ensure that they protect young people’s rights and act within the law.

The two new members of staff we spoke with told us they had shadowed an existing member of staff for a number of weeks to help them to get to know young people and the day to day routines. They said they felt safe and comfortable to work at the home and were encouraged to tell the registered manager if they did not feel so. We saw evidence to show that staff received regular supervision from the manager. Although staff we spoke with had no

previous experience of working with young people whose behaviours may challenge they spoke enthusiastically about working at the home. One staff member said “I absolutely love it.”

We were sent a copy of the staff team training record. The record showed that most staff had received training in self harm, missing from care, behaviour management, attachment theory, mental health and physical intervention as well as basic training in safer working practices, medication and food hygiene. We saw copies of certificates on the recruitment files that we reviewed. We saw that some training had been carried out internally by a psychologist and also by the registered manager. Most of the training certificates we saw on the recruitment files had not been signed off or dated.

These were breaches of Regulation 12 Safe care and treatment to ensure that staff providing care or treatment to service users have the qualification, competence, skills and experience to safely support them and protect their rights.

The registered manager carried out assessments for young people who may be admitted to the home. They were able to show us an assessment tool that they used to help ensure that a new admission to the home would not impact on those young people already living at the home.

We looked at the arrangements for food and drink. A young person we spoke with told us that there was a house menu and they shopped locally. They told us “We eat healthy food and have a takeaway on Friday.” We saw that there was plenty of food and drink available. The kitchen was always accessible to people.

We saw that young people had access to psychological support and for one young person there was an on-going treatment plan in place to help the person develop coping strategies around their behaviours. We also saw that young people had access to the local Looked After Children (LAC) Nurse. We saw that visits to see health care professionals such as doctors, dentists and opticians for routine check ups were recorded. Routine check ups with health care professionals helps to promote good physical and mental health. We also saw that staff responded by arranging appointments with the young person’s doctor or at hospital if they were feeling unwell and were accompanied by staff.

Is the service caring?

Our findings

We saw that there was an introduction process in place to help a young person settle into the home. This included offering food and drink on arrival, introducing the young person to others and staff, showing them around the house, informing them about fire drill, physical intervention procedures, zero tolerance towards bullying and how to make a complaint. They also received a welcome guide. Staff told us to make the young person feel welcome they buy and have ready new pyjamas, slippers, a dressing gown and toiletries as appropriate to the young person's individual needs.

The atmosphere at the home was calm and relaxed. People looked well cared for and were well dressed. We saw there were frequent and friendly interactions between people who used the service and the staff supporting them. A young person told us that they thought the staff were "Laid back and you could have a laugh with them." And confirmed "They know what they are doing. They are all kind."

It was clear from discussions with support workers that they had a good understanding of people's individual needs. They told us what action they would take to ensure that people were safe. For example where it was agreed that young people stayed out they spoke to the person directly to confirm they were safe.

We found young people who used the service were encouraged to become as independent as possible. One young person told us that they had started to budget and think about plans for the future and living independently.

On the day of our visit advocacy was being sought to support a young person at the home at a forthcoming review meeting.

We saw that personal information about people who lived at Altum Spring was stored securely which meant that they could be sure that information about them was kept confidential. It was noted that some information about young people was on the walls of the office. We were told that young people did not have access to the office, which was kept locked when not in use however other people, for example, social workers did.

Is the service responsive?

Our findings

We looked at the care records of a young person who used the service. We saw that there were support plans and risk assessments in place as well as LAC information and a pathway for working towards independence. We saw that reviews of the placement had been undertaken by the placing authority and had been chaired by an independent reviewing officer.

The care records were needs and risk based and gave little information about the young person's strengths or the considerable progress they had made during their time at the home. We were told by young people about the progress they had made during their time at Altum Spring, however this was not always clearly evident in their records.

The service had been looking at ways that technology could be used to support young people to express their feelings and communicate with others, which included feedback on the support they received from the service. For example, some young people were able to convey their feelings and views by text. A blog facility for young people was also being developed by the provider that could be used by young people on a computer.

A young person had resumed their education since moving to the home. The home had arranged home tutoring 5 days

a week. This had enabled the young person to be confident to take three GCSE's. The young person said the home had "Made sure that I have all the resources I need including books and DVD's."

We spoke with a young person's tutor. They were able to tell us about the improvements the young person had made in terms of their ability to concentrate and that their confidence had increased. They told us that staff had supported the young person with homework outside of education hours. The young person had received careers advice and knew what they wanted to do in terms of training and employment following their exams.

The young person told us that they had started to attend a youth club in the local area. The young person said "I have made friends there and I look forward to seeing them. They told us about other activities they were involved in with the support of staff, for example, going to the cinema, playing pool, shopping and trips out to places like Alton Towers. Contact with families and friends were encouraged as appropriate.

We saw that there was a complaints procedure in place and young people were made aware about how to complain on admission. No complaints had been made about the service. A young person we spoke with told us "I know how to make a complaint and I am confident that if I had a problem I could talk with [the registered manager] and she would listen and sort it out."

Is the service well-led?

Our findings

The home had a manager who was registered with the Care Quality Commission. 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 a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

On our visit on 28 May 2015 we met with the recently appointed operations director of the company. The operations director will have oversight of the management, care practices and development of the service. The operations director was a registered mental health nurse with over 30 years continuous experience in mental health services which included being a manager registered with CQC in secure hospital settings for both adults and children.

We saw that the home was using two names for the service, one which was not identified on the home's statement of purpose. The statement of purpose is a legal document that gives information about the service.

This was a breach of Regulation 12 Statement of Purpose Care Quality Commission (Registration) Regulations 2009.

Services which are registered with the Care Quality Commission are required to notify us about certain events and incidents that occur. From the records we checked we found that the registered manager had not always notified us about incidents that had happened at the home. Five notifications were sent to us where the Police had been

involved in incidents. We asked the new operations manager to check that there were any other notifications that needed to be made under the Health and Social Care Act.

This was a breach of Regulation 18 Notification of incidents Care Quality Commission (Registration) Regulations 2009.

We were told by the registered manager on 6 May 2015 that a person independent of the organisation had carried out their first quality assurance visit to the home in April 2015. The report from this visit was not available at the time of our visit. This report was still not available on our visit on 28 May 2015. The registered manager also carried out a monthly audit of the home. The last report available was for 12 February 2015.

We were reassured by the operations director that all the issues identified could and would be dealt with quickly. The registered manager told us that they had an appropriate budget for the home and the providers would ensure that any resources that were needed would be made available for young people. We talked with the registered manager about the home's development plan.

The registered manager was clear about the need to ensure the service was run in a way that supported young people's individual needs and promoted their right to lead their own life as safely as possible. The registered manager said "I want a really good quality of care" for young people.

We saw that young people and staff were able to speak openly and freely with the registered manager in order to express their views and opinions.

A staff member told us that the registered manager was "Very good" "Approachable and supportive." We saw positive feedback and compliments made by social workers that had been retained by the registered manager.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where legal requirements were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 13 HSCA (RA) Regulations 2014 Safeguarding service users from abuse and improper treatment

Services users were not protected from acts intended to control or restrain a person using the service are a proportionate to the risk posed to them and others.

Regulation 13 (4) (b)

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

Service users were at risk of not being kept safe because up to date information about what action to take to protect people was not always available on the young person's records.

Regulation 12 (2) (a) (b)

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed

A full employment history was not always given which meant that verification from previous employees who provided services in health and social care could not be sought.

Regulation 19 (3) (a) Schedule 3 Fit and proper persons employed.

Regulated activity

Regulation

This section is primarily information for the provider

Action we have told the provider to take

Accommodation for persons who require nursing or personal care

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

Staff providing care or treatment to service users did not have the qualification, competence, skills and experience to safely and effectively support and protect young people.

Regulation 12 (2) (c)

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 12 CQC (Registration) Regulations 2009
Statement of purpose

The home was using two names for the service, one of which was not identified on the homes Statement of Purpose.

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 18 CQC (Registration) Regulations 2009
Notification of other incidents

The provider had not informed us about some notifiable events which is a statutory obligation.