

Voyage 1 Limited

Hemlington Hall

Inspection report

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Date of inspection visit:
06 December 2023

Date of publication:
10 January 2024

Ratings

Overall rating for this service

Good ●

Is the service safe?

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

Hemlington Hall is a residential care home providing accommodation to people who require personal care to. The service provides support to younger adults with a learning disabilities or autistic spectrum disorder. Hemlington Hall consists of a main house, which can accommodate up to 6 people, and 2 self-contained bungalows within the grounds, which can accommodate 2 people. At the time of our inspection there were 7 people using the service.

People's experience of the service and what we found:

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. The service worked with people to plan for when they experienced periods of distress so that their freedoms were restricted only if there was no alternative. Staff supported people to take part in activities and pursue their interests in their local area. The service supported people to have the maximum possible choice, control and independence be independent and they had control over their own lives. Care and support was provided in a safe, clean, well equipped, and well-maintained environment that met their sensory and physical needs. Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome.

Right Care

Staff promoted equality and diversity in their support for people. They understood people's cultural needs and provided culturally appropriate care that was kind and compassionate. Staff protected and respected people's privacy and dignity. They understood and responded to people's individual needs. Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs. People received care that supported their needs and aspirations, was focused on their quality of life, and followed best practice. People could take part in activities and pursue interests that were tailored to them. The service gave people opportunities to try new activities that enhanced and enriched their lives. Staff and people cooperated to assess risks people might face. Where appropriate, staff encouraged and enabled people to take positive risks.

Right Culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. People were supported by staff who understood best practice in relation to the supporting people with a learning disability and/or autistic people. This meant people received compassionate and empowering care that was tailored to their needs. Staff turnover was very low, which supported people to receive consistent care from staff who knew them well. Staff placed people's wishes, needs and rights at the heart of everything they did. People and those important to them were involved in planning their care. Staff evaluated the quality of support provided to people, involving the person, their families and other professionals as appropriate. Staff valued and acted upon people's views. People's quality of life was enhanced by the service's culture of improvement and inclusivity.

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

Rating at last inspection

The last rating for this service was Good (Published 21 October 2019).

Why we inspected

The inspection was prompted in part due to concerns received about care, support and staffing. A decision was made for us to inspect and examine those risks.

We undertook a focused inspection to review the key questions of safe, caring, responsive and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

We found no evidence during this inspection that people were at risk of harm from this concern.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Hemlington Hall on our website at www.cqc.org.uk.

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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service caring?</p> <p>The service was caring.</p> <p>Details are in our caring findings below.</p>	<p>Good ●</p>
<p>Is the service responsive?</p> <p>The service was responsive.</p> <p>Details are in our responsive findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Hemlington Hall

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

The inspection team consisted of 2 inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Hemlington Hall is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Hemlington Hall is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and

improvements they plan to make. We reviewed information we had received about the service since the last inspection.

We used all this information to plan our inspection.

During the inspection

We spoke with 3 people who use the service, 3 relatives and 3 health professionals. We spoke with 6 members of staff including the registered manager, deputy manager and care staff.

We reviewed a range of records. This included 2 people's care records and multiple medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm. Any safeguarding investigation reports were shared with the local authority and CQC.
- People were supported by staff who had the knowledge and confidence to identify safeguarding concerns and knew how to report them. Staff comments included, "I have no concerns with care and wouldn't hesitate to report anything I was concerned about. I know [registered manager] would listen and take action."
- People told us they felt safe living at the service. One person said, "I like living here. It is safe. I would prefer to live with my relative, but I know that is not possible. Living here is the next best thing." A relative told us, "I think [person's name] is safe. It's a good place, a happy place and the staff are lovely."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The provider assessed risks to ensure people were safe. Staff followed guidance and took action to mitigate any identified risks.
- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- People, including those unable to make decisions for themselves, had as much freedom, choice and control over their lives as possible because staff managed risks to minimise restrictions. Positive risk taking was embraced to allow people to maintain and improve their independence.
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately. The registered manager investigated incidents and shared lessons learned.

Staffing and recruitment

- The service had enough staff, including for one-to-one support for people to take part in activities and visits into the community when they wanted. Staff told us, "There is always enough staff and cover is sought for any absences" and "We have a good staff team here, we all pull together and muck in."
- The provider operated safe recruitment processes. All appropriate pre-employment checks were completed prior to employment commencing.

Using medicines safely

- People were supported to receive their medicines safely. Regular checks of medicines were completed by staff and the management team.
- Staff received the necessary training and had their competencies assessed before being permitted to administer medicines.

- The provider followed the principles of STOMPLD. STOMPLD stands for stopping over medication of people with a learning disability, autism or both with psychotropic medicines. Medicines were regularly reviewed by professionals and reduced where possible.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- The home was clean and tidy throughout, and regular infection, prevention and control audits were completed.
- People were encouraged to participate in household tasks to help build their daily living skills and maintain a clean environment.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act. Best interest decisions were in place and where needed, appropriate legal authorisations were in place to deprive a person of their liberty.

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.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were supported and treated with dignity and respect. They were involved as partners in their care.

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

- People were well supported by a regular team of staff who were familiar with their care and support needs.
- Relationships of mutual respect had been developed between people and staff. Staff engaged with people in a respectful manner, recognising their individual needs and responded to them appropriately.
- Professionals who regularly visited the service spoke highly of the staff team. Comments included, "I genuinely feel that people and staff have a personal connection. What I really like is staff do a lot of work to link in with families and professionals to understand a person's life history. They recognise and understand the positive impact of having a wider scope in relation to a person's needs."

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

- People were supported to express their views and make decisions about their care. People were given time to listen, process information and respond to staff and other professionals.
- Staff took the time to understand people's individual communication styles and had developed a good rapport with people. This meant staff were able to effectively communicate with people so they could make their own decisions about their care.
- Observations showed staff seeking consent and having discussions with people about how they wanted to spend their day.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- People had the opportunity to try new experiences, develop new skills and gain independence
- Staff understood people's care and support needs and encouraged them to remain as independent as possible. For example, we observed staff encourage one person to take their own pots to the kitchen and participate in meal preparation. Staff had supported another person to ensure they could safely travel to visit their relatives.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people's needs were met.

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

- Staff provided people with personalised, proactive and co-ordinated support in line with their communication plans, sensory assessment and support plans
- Care plans contained person-centred information that focused on what was important to the person.
- People learnt everyday living skills and understood the importance of personal care as individualised care plans were in place and people were supported by staff who knew them well. People, relatives and professionals spoke positively about the progress people had made since moving to Hemlington Hall.

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 provider was meeting the Accessible Information Standard. Staff ensured people had access to information in formats they could understand.
- People had individual communication plans that detailed effective and preferred methods of communication, including the approach to use for different situations.

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

- Staff supported people to maintain relationships, follow their interests and take part in activities that were relevant to them.
- People were able to participate in activities they enjoyed, and staff encouraged people to try new things and develop their skills. Staff levels were accommodated to ensure each person had the support they needed to live fulfilled lives.
- One person proudly showed us Christmas cards they had made and a holiday they had recently enjoyed. Another person explained how they enjoyed attending day services and music clubs.

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- People and relatives were aware of the process to follow if they wished to raise any complaints. One relative said, "If I have any complaints, I know who to approach."

End of life care and support

- The service was not providing any end-of-life care at the time of inspection. If required, person centred end of life care would be provided to people and their loved ones.

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.

At our last inspection we rated this key question Good. At this inspection the rating has remained 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

- There was a positive culture within the service with people being at the centre of the service. Staff spoke positively about the people they supported and knew them well.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- A professional spoke with high praise for the service and the support staff had provided to a person to help improve their quality of life. They said, "I am thoroughly impressed with the progress and outcomes they are achieving for [person's name]. [Registered manager's name] has been extremely approachable and has been of upmost assistance, being open and honest throughout."

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

- The registered manager had the skills, knowledge and experience to perform their role and had a clear understanding of people's needs, as well as effective oversight of the services.
- Governance processes were thorough and effective. They were used to monitor, assess and drive forward improvements to ensure the service consistently provided good quality care.
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed.

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 provider understood their responsibilities under the duty of candour.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- Staff embraced people's views, opinions, and personalities, tailoring their approach to each individual. People were comfortable and confident when approaching staff to discuss any aspect of their lives.
- People and relatives spoke highly of the registered manager and staff team. One relative told us, "I see [registered manager] often. They are on the ball. I get asked for feedback and fill in questionnaires."

Working in partnership with others; Continuous learning and improving care

- The provider worked closely with other professionals to ensure people receive the care and support they needed in a timely manner. Professionals reported that any issues or concerns were reported to them in a timely manner.
- The registered manager was continuously looking at ways of improving the service. They told us, "We have started to make improvements to certain aspects of the building. We are trying to have a proactive approach, rather than reactive."