

The Jubilee House Care Trust Limited

Jubilee House Care Trust - 20-21-22 Lincoln Close

Inspection report

20-22 Lincoln Close
Welwyn Garden City
Hertfordshire
AL7 2NN

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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

20-21-22 Lincoln Close is a 'care home' for 6 people who have a variety of support needs including learning disabilities, mental health conditions and autism. People in care homes receive accommodation and personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. residential care There were six people living at the home at the time of this inspection. It consists of two properties, a two bedroom and a four bedroom flat with a shared garden. Each person has their own bedroom with shared bathrooms and kitchens and each flat contains a dining room and a lounge.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen. Registering the Right Support CQC policy

At the last inspection the service was rated Good. At this inspection we found the service remained Good.

People welcomed us into the home and told us they felt safe and happy living at Lincoln Close. People's relatives told us that they were confident that people were safe.

Risks to people were appropriately assessed, planned for and managed. There were sufficient competent and experienced staff to provide people with appropriate support when they needed it.

People were 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 were treated with kindness by staff who respected their privacy and upheld their dignity. Staff worked in a way that demonstrated they treated the service as people's homes and they told us this was the ethos of provider and the management team. People and their relatives told us that they did not have any complaints but felt confident to raise any issues if they arose.

People received appropriate support to maintain their health and well-being. Staff supported people to access healthcare services when needed and worked closely with healthcare professionals.

The manager sought people's views about the service and acted on their feedback. People's relatives were encouraged to be involved with people's lives where appropriate and to provide feedback on the service.

There was a positive, open and inclusive atmosphere within the service. People's views were sought about the service and acted upon. There was good feedback from relatives and external professionals about the managers and staff of the service. Systems were in place to monitor the quality of the service and any improvements required were made.

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

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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 checked 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 comprehensive inspection was carried out by one inspector on 5 December 2017 and was unannounced.

The provider completed a Provider Information Return (PIR) and submitted this to us in September 2017. 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 reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us.

During the inspection we spoke with five people who used the service, the manager, the deputy manager, three care staff and two relatives. We reviewed two people's care records, two staff personnel files and records relating to the management of the service. We had a tour of the building with service users and three people showed us their rooms. We spent time in the communal lounge, dining room and were able to observe interactions and the support offered.

Is the service safe?

Our findings

People welcomed us into the service and told us they had been involved in talking about how to keep safe within and outside of the service. One person explained what we needed to do if the fire alarm rang during the inspection saying, "We must go out." One relative said, "I feel so secure and happy with how my relative is supported."

Staff demonstrated to us that they understood how to keep people in their care safe. This included how to recognise and report abuse. They had received training about how to recognise abuse and the subject was regularly discussed during team meetings or one to one meeting with one of the managers. People living at Lincoln Close pointed out to us the easy to read posters displayed on both bullying and safeguarding.

Risks to people's safety and wellbeing were identified across all aspects of their lives and control measures were in place to reduce these risks. Risk assessments were seen for example in regard to self care, mobility, finance. There was clear guidance as to how to manage behaviour that may challenge people or those around them. One person was happy to let us listen to a report they wrote together with the deputy manager about an incident that occurred that morning, what had happened, how it was resolved and what they had learned. A staff member said, "If someone wants to do something then we will find ways for them to do it we will risk assess to minimise any risk to them."

We observed that there were enough staff to meet people's needs. People were able to go out when they wished or have time with staff within the home. However, the manager and deputy were aware that evenings and weekends required more flexible staffing. Therefore they created a new rota giving an extra staff member each evening and at the weekend. This will allow for more interaction with people within the home and enable people to go out more easily.

People kept their medicines in their rooms in a locked cabinet and were supported by staff observing or prompting them with their medicines. One person showed us their cabinet saying, "Here are my medicines. Staff watch me then they write it down." However, whilst staff had been trained and there were clear policies to safely manage medicines, there had been a number of staff errors in recording which medicines had been taken. The manager and deputy had taken action and put in place staff retraining, regular staff competencies assessments, updated the medicines guidelines and carried out frequent audits to pick up any discrepancies.

People lived in a clean environment. There were infection control checks in place as part of health and safety but specific checks were being further developed.

Managers and staff demonstrated that they understood their responsibilities to raise concerns and to record and report safety incidents. Lessons were learnt and improvements made when things went wrong. Information was shared at team meetings, supervisions or as needed.

Is the service effective?

Our findings

People were supported by skilled and knowledgeable staff. One person spoke of how "We talk to the staff they help us we are happy." People's relatives told us that they felt staff were skilled and knowledgeable to support people living at the home. One relative said, "They are great, really helpful, and very good. I know they will contact me if they need to."

Staff were clear about their roles in supporting people and were confident they had the skills to do so. One staff member said, "Training is very good and there is always someone to ask." All staff had monthly supervision and all felt able to freely discuss any concerns. There was a set agenda with space for other issues to be raised with action plans carried forward.

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 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). People who used the service had their capacity to make decisions and consent to their care assessed appropriately under the MCA. No DoLS applications had been made to the local authority at this time.

Discussions with staff and our observations demonstrated they understood MCA and DoLS and how this applied to the people they supported. Staff supported people to make decisions independently. One staff member said how peoples' appearance is very important. "I see choice is helping people to see if one colour might look better than another and to show them other options for them to choose from not just stick to what they have always worn."

People were supported to maintain good health and access relevant healthcare services where necessary. There were good working relationships with health professionals such as GPs and specialist nurses. The deputy manager explained how they would seek referrals to relevant professionals to ensure each person was reviewed and received the right care.

People were encouraged to eat a nutritional, balanced diet whilst maintaining their personal preferences. One person said how they had been trying to eat healthily and were very pleased when the GP said they had lost weight. Staff said people were now making their own pizza rather than buying it. A pictorial menu was created for the week which was planned together each Sunday. The deputy manager said they were also building in walks during the week venturing further each time to help increase peoples general health.

The premises were appropriate to support the needs of people. They consist of two neighbouring properties, a two bedroom and a four bedroom flat with a shared garden. Each person has their own bedroom and each flat contains a communal sitting room and bathrooms. There were action plans in place to update and refurbish the two communal bathrooms and sitting rooms in the four bedroom property. People's individual rooms were being redecorated and people were clearly pleased with their choices. One person told us how they had chosen their favourite colour for their room and the type of bed they wanted.

Is the service caring?

Our findings

People told us that staff were kind and caring. One person said, "I really like it here it is my home." Relatives spoke very positively about the staff, how much they cared and were interested in them as well as their family member. One relative told us, "We are always welcomed".

Staff were calm and friendly and we observed them interact with people in a warm and caring way. One staff member said, "I think that I am motivated because they are such great people (service users) and there is always something to learn from them. It is great when you see the difference that small steps in progress make."

Staff respected people and supported them with dignity. We observed how when people had been upset staff spoke with them in an adult way and calmed and supported them to see what had happened and how they could cope with their feelings. Staff said how over the last two months one person had ceased to self-harm after having been encouraged to take on responsibility for their own actions and to be more active in planning their day. A relative commented on how their family member had begun to do more and even interact more over the last few months.

Staff showed their sensitivity to Christmas as a poignant time for people, as well as celebrating the happy occasion, the deputy manager suggested making baubles as a way to represent and remember all those former residents or family members who had died.

Staff worked in a way that demonstrated they treated the service as people's homes; never entering the either the home or people's rooms without knocking. Staff spoke of how they involved people in their care and were mindful of maintain people's choice and dignity at all times. People were encouraged to form and maintain friendships and relationships with who they chose and were given space and privacy.

People's personal and private information was kept safe and confidential.

Is the service responsive?

Our findings

People were fully engaged in developing their plan of care and support with staff and family members when appropriate. During the inspection we observed staff supporting people and responding to their needs in a way that confirmed they knew people well.

We saw people's support plans had been updated and the format simplified to make them more accessible. Plans were written often using people's own expressions. For example, a consent form was now one page with the person's picture and photos of what they were consenting to.

A healthcare professional commented on how, "A lot of work has been done to ensure that picture aids are used when possible and this has become apparent with the displays in the dining room and following recognition that staff need more training around autism, this has been received."

Comments were made on the overall improvement in the whole house and the environment being calmer leading to fewer incidents.

The managers had introduced a pictorial agenda for meetings and the minutes of the last service users meeting were also accessible in terms of information and pictures.

The deputy manager said that they are focussing on giving each person a sense of their own abilities and see that people's life skills are being enhanced and developed. For example, one person who was physically limited was encouraged to also be involved in practical aspects of the home to build their confidence. They now wipe the table after meals which they are very happy about. Another change noted by staff was with one person who previously rarely interacted with staff or other service users, they used to eat alone and not taken part in the house. The person now eats and relates with other people in the house and talks with staff. The deputy manager said, "We were delighted recently to see [person] actually answering the phone. It was so good they have come a long way".

People were supported to participate in activities in and outside of the home which reflected their interests and preferences. People talk about what they want to do in the monthly meetings and in their individual meetings with staff. One person told us, "I am baking today." Another person spoke of how they were going to start to help in a local shop.

There had been no recent complaints received. People's relatives told us they felt able to feedback their views on the service and were encouraged to do so. People and relatives told us that they knew how to raise concerns but had not needed to.

People had care plans in place to indicate their preferences in relation to their end of life care. People stated who they wished to be contacted when their death was imminent, and how they wished their funeral to be handled.

Is the service well-led?

Our findings

Relatives, staff and professionals told us they felt the home was well managed. One relative said, "I am very happy with the managers, they have made a big difference and my relative is much calmer."

Staff told us they were enthusiastic about their work and felt valued by the registered manager and the deputy manager. They said that they were supported to share concerns with the managers and felt that their views were valued and helped improve the service. One staff member said "We are encouraged to be involved in all and our views and concerns acted upon"

There were monthly meetings for the people who used the service and regular staff meetings. Staff said they received good support and regular supervisions and could contribute their ideas about the running to the service. Supervisions, appraisals and training were reviewed regularly to ensure staff accessed support and the relevant training required for their roles.

As part of the providers wish to seek continual improvement they had requested an external survey of all of the services in May 2017 which involved feedback from people who used the service, their relatives, social and healthcare professionals and staff. Feedback from the survey was used to inform action plans where required.

There were effective quality assurance systems in place that monitored people's care. We saw that audits and checks were in place which monitored safety and the quality of the care people received. These included health and safety, medicines, food hygiene and care plans. As a result any issues found were addressed. For example as was seen with regard to gaps in medicine records.

There was a positive, open, inclusive and relaxed atmosphere within the service. People related easily to the managers and staff. People's views were sought about the service and acted upon. There was good feedback from relatives and professionals about the managers and staff of the service.