

Mental Health Care (U.K) Limited

# Acrefield House

## Inspection report

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Date of inspection visit:

07 June 2019

14 June 2019

Date of publication:

23 July 2019

## 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?	Requires Improvement ●

# Summary of findings

## Overall summary

### About the service

Acrefield House is a residential care home providing support and personal care for up to 12 people in one adapted building; at the time of our inspection seven people were living in the home.

At our previous inspection in December 2018 the service was in breach of Regulation 9 and 17. This was because the provider had not ensured that people's care and support always met their needs and reflected their preferences; and the provider had not taken adequate steps to improve the safety and quality of the service provided for people. At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation.

At this inspection we observed a cultural shift in how staff interacted with people. People were treated with dignity and respect and we observed many positive and empowering interactions between staff members and people supported; we also saw that staff paid attention to detail and were very thoughtful.

There was a distinct improvement in how people were consulted with and how they were supported to make decisions. People were now supported to make decisions in every aspect of their day to day lives and support. Their views and decisions were listened to and respected. People were supported to set goals for the future, to express themselves and start planning towards aspirations that they had for themselves

The service ensured people were kept safe by staff having safeguarding training. Staff felt empowered to speak up if they had any concerns that a person was at risk of abuse and the provider ensuring appropriate policies were in place. The service was open and honest in raising appropriate safeguarding alerts.

The service was provided in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent. People were participating as active members of their community and had many more life enriching experiences. The activities people took part in were tailored to people's interests and tastes; they did not follow a set plan or schedule which enabled people to have maximum choice and control.

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to 12 people; at the time of our inspection seven people were using the service. If the home became

full this would be larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. There was deliberately little to differentiate the building as a care home other than five large industrial bins that were at the front of the home; we spoke with the registered manager about how this could be improved.

The registered manager and deputy manager were knowledgeable about people and spoke with a passion about people receiving a high standard of care and support. Staff members described the registered manager as very supportive, approachable and proactive. There was a service improvement action plan and, the registered manager demonstrated that most of the actions set were completed or were in progress.

Staff at Acrefield House had worked in partnership with the local authority, people's families and health and social care professionals to help improve the lives of a number of people since our previous inspection

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection and update

The last rating for this service was requires improvement (published 3 December 2018) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

This service has been in Special Measures since December 2018. During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in Special Measures.

#### Why we inspected

This was a planned inspection based on the previous rating.

Follow up: We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

# Acrefield House

## 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 Care Act 2014.

#### Inspection team

This inspection was completed by two adult social care inspectors.

#### Service and service type

Acrefield House is a 'care home'. People in care homes receive accommodation and nursing or 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.

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

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with nine members of staff including the registered manager, deputy manager and support workers. We also

spoke with two health and social care professionals involved with the service.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

At our last inspection the provider held no information on the background or suitability of agency staff that were being used. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 17.

- The use of agency staff had reduced; and the home now used a small team of bank staff. Bank and agency staff received an induction and checks on their suitability before they started.
- New staff had been safely recruited, using appropriate checks.
- There were enough staff available to meet people's needs and to support them to have opportunities to spend their time as they chose. Staff were matched to people supported by the shift leader to ensure each person had appropriate support.

### Systems and processes to safeguard people from the risk of abuse

- All staff received training in safeguarding vulnerable adults and appropriate guidance and policies were in place at the service.
- In the past staff had not consistently spoke up when people were at risk of abuse. Staff now told us that they felt confident raising a safeguarding alert, and the provider had developed a track record of recording and reporting any concerns to the local authority.

### Assessing risk, safety monitoring and management

- The risks presented in supporting each person had been assessed and a risk management plan gave guidance for staff on how to support people to reduce these risks. These assessments and guidelines were regularly reviewed and focused on how to best communicate with a person to reduce the likelihood of a risky incident occurring.
- The environment of the home was safe; regular checks and assessments took place to ensure it remained safe. There was an emergency evacuation plan in place that was personalised to each individual. Each day there was designated, and qualified staff members identified as the first aid lead, medication lead and the fire marshal.
- People were supported to take positive risks with appropriate support if this meant that people had increased opportunities and control within their lives.

### Using medicines safely

- Staff members followed safe and effective systems in storing, administering and documenting people's medication. Staff received training and their competencies were checked.
- Each person had a medication profile containing required information. Appropriate policies, procedures and guidance for staff were in place, which reflected current best practice. The service was using the 'STOMP' guidance. STOMP is a national campaign to stop over medication of people with a learning disability.
- There were guidelines in place for staff to ensure that all use of as and when required (PRN) medication was appropriate. The use of PRN medication was monitored at the home and was infrequent.

### Preventing and controlling infection

- The environment within the home was clean. Staff received infection control and food hygiene training and followed safe practices.

### Learning lessons when things go wrong

- The home had an incident reporting system that recorded all incidents, accidents and near misses in people's support.
- The staff team received guidance and regular discussions about what actions to take and what to record if something went wrong; the records were regularly reviewed by senior staff and for learning as part of staff team meetings. These practices helped to keep people safe.

# 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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- No new people had come to live at the home since our last inspection. However, people at the home had their needs and choices, along with any changes documented as part of reviewing their care plans with them.

Staff support: induction, training, skills and experience

- Staff told us that they felt well supported. They described a more positive working atmosphere within the home. One staff member said, "This is now a lovely place to work; the managers are always ready to help."
- Staff received a thorough training program of areas that the provider considered mandatory training with regular refresher sessions. There was also additional training provided in specific areas of support that would enable staff to be more effective supporting a person.
- Staff were also supported by receiving regular supervision meetings with a senior member of staff, team meetings and learning workshops which staff contributed to; and an annual appraisal of their performance. Staff told us that they had personally developed and become more effective in their role due to the support they had received.
- The staff team told us that they had spent time with senior staff working out what the mission of the team was and had explored best practise in a variety of meetings and workshops. There was now a team mission that each staff member had contributed to.

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

- There was a wide variety of freshly prepared, home cooked meals available. The cook was passionate about people enjoying their food and was knowledgeable about people's nutritional needs, tastes and preferences. They responded to people's special requests and feedback about their food and each day had a variety of options available to meet people's tastes.
- Everybody's feedback was very positive about the food available. One person told us, "If you went to a restaurant for this food you would pay good money for it."

Staff working with other agencies to provide consistent, effective, timely care

- We saw evidence of staff working in partnership with people's families and providing information to health and social care professionals to help meet people's needs and wishes.

Adapting service, design, decoration to meet people's needs

- The environment of the home had been improved to help meet people's needs. The use of some rooms

had been changed so that there was more communal space for people living at the home. This included creating a quieter relaxing space and redecorating a second lounge area.

- The dining area had been refurbished which made it a more inviting area in which to eat. Breakfast facilities had been arranged to enable people to be as independent as possible and have more choices. This included push button coffee machines and a conveyor toaster, so people could help themselves.
- People supported, and staff were really positive about these changes; more people now chose to use the dining area. One staff member said, "The changes enable us to support people well; so, they can do more for themselves."

Supporting people to live healthier lives, access healthcare services and support

- Staff supported people to make and attend healthcare appointments. They kept records on people's wellbeing and health needs as part of their care plan
- Staff worked in partnership with healthcare professionals. For example, the registered manager had prompted the review of one person's healthcare needs after an increase in as and when required medication (PRN). The healthcare professional praised this as diligent and an appropriate and timely prompt from the home to review the person's 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 Act 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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

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. The service was operating within the principles of the MCA.

- People were consulted with and supported to make as many decisions as possible for themselves. If people were not able to make a decision; a decision was made in the person's best interest following the appropriate process.
- If a person lacked the capacity to consent to their care and accommodation the provider used the DoLS process to ensure people's rights were protected.

# 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to, 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

- Staff had reflected on the way they interacted with people living at Acrefield and had used several methods to help ensure improvements were made. They used a method for reflecting on what was a core responsibility of staff, where they could use judgment and what was not their responsibility, or what could be interfering in people's choices. This had led to staff promoting choice and being less directive when supporting people; and had encouraged people to make more decisions and express themselves more.
- A practise had developed of staff positively challenging each other and people outside of the home if they witnessed any interaction with people that could be improved, detracted from people's dignity or was in some way disrespectful. This was done in a non-judgmental manner and recorded in a way that promoted improvements and learning.
- At this inspection we observed a cultural shift in how staff interacted with people. We observed many positive and empowering interactions between staff members and people supported; we also saw that staff paid attention to detail and were very thoughtful. One staff member told us, "It has become the new normal."
- Staff responses to people who did things that may challenge their support was more thoughtful and positive.

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

- There was a distinct improvement in how people were consulted with and how they were supported to make decisions. People were now supported to make decisions in every aspect of their day to day lives and support. One person's social worker told us about the staff, "They are quick to change and to listen to the ques from [Name]."
- People were made aware of opportunities available to them, to help them make informed choices. People were empowered to take control, to change things and to change their minds when they wanted to do different things during the day.
- People's views and decisions were listened to and respected; they were also recorded each day as part of the daily records to help staff learn what was working and not working in people's lives. For example, one person had on occasion decided not to take their medication. There had been a medication review arranged with the person's GP. Staff had spoken with the person and to help them feel reassured had researched each medication and what it was prescribed for. This was printed in large print for the person and helped to reassure them and enabling them to decide that their medication was appropriate.

Respecting and promoting people's privacy, dignity and independence

- There was a focus on staff promoting people's dignity and independence which created a more positive atmosphere and positive relationships between people supported and staff members.
- People were treated with respect and were supported to be as independent as possible and to have autonomy over their lives. This was in big and small ways; for example, one person used assistive technology to remain safe whilst having maximum privacy. Another person now used the control to move their own reclining chair and people had control of what was on the TV.
- Staff treated people as individuals, respected their communication style and took time to interact with people in a way that was meaningful to them. Staff were never too busy to interact with a person when they wanted to, and they respected what was important to the person. When staff left at the end of their work time; they said goodbye to each person individually by name.
- Staff no longer dominated the environment; they focused on people rather than tasks. For example, one person was supported to take other people's take away orders for a 'chippy tea' and they looked like they enjoyed this. People ordered a wide variety of meals and they were served in a more dignified manner.
- Staff supported people to increase their independence through involving them in daily living tasks. For example, one person now scanned the shopping in a local supermarket, another person had been supported to use a cash machine, a third person had been supported to buy a gift for a friend. This helped staff to learn as a team and to provide consistent support.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to, good. This meant people's needs were met through good organisation and delivery.

At our last inspection the provider has not ensured that people's day to day support met people's needs and reflected their preferences. This was a breach of regulation 9 (Person centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 9.

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

- People were now participating as active members of their community and had many more life enhancing experiences. At this inspection people were happy to tell us what they had recently done with support from staff. People told us they had been to the cinema, concerts, local pubs, eating out, shopping, participating in sport, relaxation, social events, exercise and sports groups. People also had volunteer roles within the community and had taken up new hobbies and interests. People had started using public transport as well as the transport provided by the home. One social care professional told us that staff now had, "An abundance of ideas."
- The activities people took part in were tailored to people's interests and tastes; they did not follow a set plan or schedule which enabled people to have maximum choice. An activities co-ordinator worked alongside support staff to help people explore new ideas and to build upon people's positive experiences.
- People who previously had not been involved in activities and everyday events inside their home or within their community were engaged in doing so much more. People told us that they were happier doing more; staff told us they proud of the support they provided and it "feels absolutely brilliant."
- Each person had an individualised care plan which contained guidance for staff on how to provide appropriate support for the person. The plan also contained the details of what was important to the person. One social care professional told us, "The care plans are clear, they are centred around the person and who they are."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's support was adapted so that they were communicated with effectively in a way which met their needs. Each person had a communication care plan which staff helped to complete with people. These

contained guidance from what staff had learned over time about people's communication style. For example, staff told us of some phrases that one person uses and what they mean to the person and how to best respond to them.

- Some people had information provided in large print and some staff had received training in Makaton which is a system of communicating using signs and symbols. One staff member told us about supporting one person, "Using Makaton and body language we are able to hold a really good conversation."

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 participated in a range of different activities inside the home and in the local community that involved them interacting with people and providing opportunities to build relationships.
- Care plans contained the details of which people were important to people. People were supported to maintain these relationships with family and friends; one person had recently been supported to travel some distance to visit and keep in touch with a personal friend.

Improving care quality in response to complaints or concerns

- A record was kept of any concern or complaint received about the home. Complaints were acknowledged, responded to and investigated.
- Complaints were used as an opportunity to improve the service people received.

End of life care and support

- Nobody at the home was receiving end of life care and support.

# 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 the provider has not taken adequate steps to ensure the safety and quality of the service provided for people. This was a continued breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 17.

At the last inspection this key question was rated as inadequate. At this inspection this key question has now improved to the rating of requires improvement. This meant the service management and leadership had made improvements; however there had not been enough time for these to be embedded or demonstrate sustainability.

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

- There had been a significant improvement in the atmosphere and culture within the staff team and in the home. Focusing on being person centred in many different areas of people's support had developed into a cultural change. People's support was now progressive, people had more enriching life experiences and lives in a home with a more positive atmosphere. Staff members were enthusiastic about supporting people to grow and achieve more within their lives.
- The registered manager and deputy manager were knowledgeable about people and spoke with a passion about people receiving a high standard of care and support. Staff members described the registered manager as very supportive, approachable and proactive.
- Staff overwhelmingly fed back that there had been a positive culture shift within the home. One staff member told us, "I didn't want to talk to you before; now I want to tell you what I have been doing." Another staff member told us, "Loads of little changes have developed to a complete change in the atmosphere. We are going to keep on going." A third staff member told us, "We have come on leaps and bounds. People are more confident, we all are."

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 told us that the home had been through a difficult time. We found them to be open and honest about previous failing and areas that needed continuous improvement
- The registered manager shared appropriate information with the CQC and the local authority safeguarding team. Staff from the local authority told us that the registered manager and deputy manager were both open and keen to further improve the service people received.

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

#### regulatory requirements

- It was evidence from the improvements made in the quality of the service that the registered manager and other senior staff had taken action based upon our previous inspections and feedback from the local authority.
- There was a service improvement action plan. The registered manager was able to demonstrate that most of the actions that had been set were completed or were in progress. They told us that a next stage of further development was being planned for the home.
- There was evidence that the service had benefitted from the providers quality assurance team and assessments from other visiting senior staff. This was alongside the registered manager completing checks and audits, including regular night time visits. The provider had arranged for senior staff from other services to visit the home and to share their learning.

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

- People were consulted with and were supported to set goals for the future, to express themselves and start planning towards aspirations that they had for themselves. One person had moved into their own home and this had prompted two other people to start talking about doing the same.
- People were consulted about their planned support and people and if appropriate their family members were involved in reviewing people's care plans. People had been supported to attend workshops to feedback what they wanted from their support.
- Staff had attended workshops, had been consulted with and told us that they felt very involved in recent changes and improvements at the home.

#### Continuous learning and improving care

- There had not been time for improvements that had been made to the service to demonstrate sustainability. However, the registered manager and other senior staff told us the service will continue to improve, and they will challenge themselves and each other to continuously learn.
- The registered manager was receptive to feedback during the inspection and made some changes to the service provided following our observations. They also told us Acrefield House may not be the best place for some people to achieve maximum outcomes in their life. Since our last inspection one person had been supported to move into their own home to have greater independence and control of their lives. The registered manager told us they will continue to support people to ensure they receive the best support, in a way that best meets their needs.

#### Working in partnership with others

- Staff at Acrefield House had worked in partnership with the local authority, people's families and health and social care professionals to help improve the lives of people since our previous inspection. One health and social care professional told us the partnership working and communication with staff at the home had been, "Really good."