

Care Futures

Kendall House

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Kendall House provides accommodation, personal care and support for up to 8 people. People who live at the home have a learning disability. There were 6 people living at the home at the time of the inspection.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

People's experience of using this service and what we found

Right Support:

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

Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. People were supported by staff to achieve their aspirations and goals. Staff enabled people to access specialist health and social care support in the community.

Right Care:

People were supported by staff that knew them well and who were committed to providing person centred care. People were involved in making decisions on how they wanted to spend their time. It was an active household with people enjoying each other's company. It was evident the staff and people had built positive relationships. Staff were caring and passionate about the service and the people they supported. People told us they liked living in Kendall House and were happy with the staff that supported them.

Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. 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's support plans reflected their individual needs. People were supported to lead active lifestyles of their choosing. People's wellbeing was promoted, and their rights protected.

Right Culture:

People led inclusive and empowered lives because of the values, attitudes and behaviours of the provider, management and staff. Staff demonstrated their commitment to the values of the service that put people at the centre of the care and support provided. Staff felt supported and worked as team to ensure people's

care and support needs were met.

Staff placed people's wishes, needs and rights at the heart of everything they did. People and those important to them, including advocates, were involved in planning their care. There was an open and inclusive culture where people and staff were valued, and their views sought to help drive improvements.

There were robust quality assurance processes in place that drove improvement.

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

Rating at last inspection and update

The last rating for this service was good (published 4 September 2018). The overall rating for the service has remained good based on the findings of this inspection.

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding. We inspected the domains of safe and well led.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Kendall House 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.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was exceptionally well-led.

Details are in our well-led findings below.

Kendall 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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was completed by one inspector.

Service and service type

Kendall House 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. Kendall House 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people who lived at the service about their experience of the care provided and spent time with them observing interactions with staff.

We spoke with 3 members of staff, the registered manager, and the deputy manager. We spoke with 2 relatives and contacted 3 health and social care professionals about their experience of the service. A further 2 staff contacted us by email to tell us about their experience of working at Kendall House.

We reviewed a range of records. This included two people's care records, daily records and medication records. We looked at the records relating to Deprivation of Liberty for people that had this in place. A variety of records relating to the management of the service, including training data, recruitment documentation, duty rotas and quality assurance records.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff had training on how to recognise and report abuse and they knew how to apply it. Staff told us they were confident appropriate action would be taken if they had any concerns. Comments included, "I have no concerns, but I know if I did, action would be taken" and "The deputy would act on any concerns along with the manager, I have no concerns. I can also report to the Local Authority safeguard team".
- The senior management team understood their responsibilities for keeping people safe from harm and abuse, by reporting concerns to the safeguarding team and working with other agencies to protect people.
- People told us they felt safe and well supported by the staff. People were asked whether they had any concerns during their monthly house meetings. Comments included, "I like living at Kendall", "I like the staff" and "The staff are my friends". People looked comfortable with staff throughout the inspection. Relatives said the service was safe and their loved ones were well cared for.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- Staff managed the safety of the living environment and equipment through checks and action to minimise risk.
- There was a small radiator behind a toilet door, which potentially could put people at risk of scalding if they fell in this area. The registered manager took immediate steps to minimise the risk and the maintenance person was visiting the service the day following the inspection. We were assured this would be addressed.
- Fire risk assessments were in place along with individual evacuation plans for each person living in the home. The registered manager said they had requested a new risk assessment when they first started to manage the home. All recommendations had been actioned in a timely manner.

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 when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is

usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.
- Staff empowered people to make their own decisions about their care and support. People were being supported to make choices on the day of the visit on what to eat, drink and what activities they wanted to do.
- Staff ensured that an Independent Mental Capacity Advocate was available to help people if they lacked capacity and they had nobody else to represent their interests. A person's advocate confirmed the staff were proactive in working with them and keeping them informed about any changes to the person's care.
- Staff clearly described how they supported people to make daily choices. Where these were completed in a person's best interest the staff involved family and health and social care professionals. Records were kept of best interest decisions.

Staffing and recruitment

- Sufficient staff were supporting people. People told us they liked the staff that supported them. One person told us, "We always have 2 staff and a sleep in and don't have agency staff. I like all the staff".
- People told us they could go out with staff when requested and often went out for coffee, walks and a social group for people with learning disabilities. People were planning to go bowling on the evening of the inspection. Two people had been on a shopping trip. This showed there were enough staff to support people.
- Staff recruitment and induction training processes promoted safety. People views were sought in respect of new staff as part of the interview process. The registered manager promoted their involvement to ensure people liked the staff that were supporting them.

Using medicines safely

- People's medicines were safely managed. Monthly checks were completed to ensure medications were stored correctly, administered safely and all relevant documentation was in place.
- Only staff that had been trained and their competence checked would help people with their medicines. This was reviewed annually to ensure staff were competent or more frequently where an error had occurred.
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

The registered manager demonstrated they had followed the government guidance on visiting arrangements. Friends and family were able to visit the home with no restrictions. This allowed people to stay in contact with their relatives during the COVID-19 pandemic. People confirmed they had regular contact with family and friends throughout the pandemic.

Learning lessons when things go wrong

- Accident and incident records were recorded and showed appropriate actions had been put in place. The registered manager reviewed all accidents for any themes or reoccurrence.

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

- The registered manager and the staff understood and implemented the right support, right care, right culture guidance. People's care was planned, using a model of care that maximised people's choice, control and independence. This was reflected very much in the provider's values in supporting people. People were empowered to lead the life they wanted based on their individual aspirations and goals, which were planned for and celebrated.
- People were happy to share with us lots of activities that they had been supported to do. This included celebrations at Christmas, a summer barbeque, parties with neighbours to celebrate the Queens Jubilee, holidays and the daily activities they participated in.
- People were supported with their goals and aspirations. Memory books had been developed for each person capturing what they had done over a 12-month period. A relative said the "The book was amazing. Blew my mind with what they had done".
- People had a keyworker who supported them with planning their goals and ensuring their plans of care were current. The registered manager said that there had been a real focus to plan lots of things for people to do to make up for when the country was in lock down and the impact of the pandemic.
- The registered manager was passionate at providing the best possible care to people and strived to achieve excellence. They did this by empowering the staff team with a strong emphasis on wanting them to be the best in their role and creating the best outcomes for people. They demonstrated effective management and leadership skills within their role. Their passion, knowledge and enthusiasm of the service and the people in their care was evident. They were proud of the team, their flexibility and support they gave to people.
- A member of staff told us, "The manager led by example and encouraged the team to share their vision. She has installed a new enthusiasm within the team. It's great to see, her passion has spread through the team and we are all engaged and motivated in giving the residents the exceptional care they deserve. Another member of staff said, "I am proud to work for (name of manager) and thoroughly enjoy my job". All staff said that morale was really good within the team.
- The provider recognised where staff had gone 'above and beyond' in their practice with an employer of the month. One member of staff was praised for their support to a person who had spent a significant period of time in hospital. The staff member visited regularly including in their own time, which meant the person had a better day by seeing a familiar face. When the person came out of hospital they celebrated Christmas in January with their friends in the home. It was evident this was important to the person.

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 understood the requirements of the duty of candour. This is their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm. Relatives said there was really good communication between them and the staff.
- The registered manager was aware what needed to be reported to us and the local authority in respect of safeguarding, accidents and incidents.

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

- The registered manager carried out checks on the home to assess the quality of service people experienced. These checks covered key aspects of the service such as the care and support people received, management of medicines, cleanliness and hygiene, the environment, health and safety, and staffing arrangements and staff training and support.
- Since the last CQC inspection there had been a change in manager. The registered manager was also responsible for the management of another of the provider's services.

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

- People, relatives, staff and professionals were all consulted on their views of the service. This was done via surveys, staff and house meetings. Where feedback was provided the provider and register manager listened carefully to this and implemented effective change where needed. For example, replacing a person's bedroom furniture and curtains.
- People's equality characteristics were protected. Care was tailored to the person. Two people told us they went to church every Sunday. People told us that at Christmas they had met with friends from another of the provider's homes. People spoke positively about these events. One person told us about the reindeers and Santa's elves. Everyone said it was fun and they were looking forward to the Summer fete.
- Relatives, we spoke with were extremely complimentary about the registered manager and the staff. Comments included, "Brilliant, always made to feel welcome and communication is very good", and "They (staff) are really lovely and deserve a medal. I have no complaints".

Continuous learning and improving care

- The registered manager told us they had made improvements since working at Kendall House including embedding the provider's values and ethos. This included developing a refurbishment plan for the house involving people living in the home. A relative told us there had been lots of decoration and refurbishment of the environment.
- The values of the service were very much embedded into everything such as supervisions, staff meetings and the continual review of staff performance. The registered manager knew it was important for all staff to have a good understanding of the expectations and values.
- A member of staff said, "(name of registered manager) has taught us all the values of the organisation and the key areas of inspection and we talk about them at staff meetings".
- Staff confirmed they received a comprehensive induction, which included the Care Certificate. One member of staff told us they were in the process of completing a management vocational course. A member of staff told us they had learnt to cook since working at Kendall House. They said this was really important as people were very much involved in preparing and cooking the meals. This showed that both people and staff were empowered to learn and maintain skills and knowledge.

Working in partnership with others

- The service worked in partnership with health and social care professionals to ensure people's needs were met. For example, they had links with other resources and organisations in the community such as GPs and the community learning disability team. Feedback was sought after each visit. The staff had received an array of positive comments such as 'Staff know people really well' and '(name of person) is happy and thriving and taking part in various activities'. All responses had been scored as excellent for staff attitude, safety, staff knowledge and responsiveness.
- Feedback from health professionals was extremely positive. One health professional told us, "I have to say the energy in Kendall house is fantastic and it is certainly my favourite home to visit" and another professional told us, "The staff will ensure that people's care plans are up to date and will respond to any requests to organise any ongoing care and support. The staff have a lovely manner with the people and care for them well".