

# Interact Care Limited

## River Cottage

### Inspection report

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County Durham  
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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

River Cottage is a residential care home providing personal care to 3 young people with learning disabilities and autism at the time of the inspection. The service can support up to 3 people.

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

We received extremely positive feedback from people, they told us they were very happy living at River Cottage and really enjoyed the learning opportunities, activities and the local community they engaged in. Relatives spoke very highly of the staff team improvements their support had made to their relative's communication and wellbeing as a result.

The service had been fully developed and without doubt designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures people 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 received exceedingly well planned and co-ordinated person-centred support, appropriate and inclusive for them.

Peoples health, well-being and communication were drastically improved as a direct impact from the level of personalised support they received from the staff team who continually supported people to develop, try new things, learn new skills to help achieve personal goals.

Peoples communication was massively improved from the innovative use of accessible information. This was used creatively and appropriately and was readily available for people throughout the home. This was done inclusively and made use of various formats to suit individuals.

The registered manager and staff supported people to make valuable connections to help tackle social isolation and to support each other. People were able to access a superb range of activities in the home and outside which promoted, education, improved wellbeing and community citizenship. This included the highly regarded Princes Trust and Duke of Edinburgh awards.

The registered manager developed bespoke training by using external resources to their advantage and this was used across the providers other services as a benchmark. Their expertise regarding creating person centred culture, a modern, homely environment and positive behaviour support was shared by the provider.

There were excellent systems in place for communicating with people, their relatives and staff to ensure they were fully included by one to one key worker meetings, handovers, team meetings, phone calls and emails.

People were supported emotionally and confidentially to have maximum choice and control of their lives

and staff supported them in the least restrictive way possible; the policies and leadership in the service ensured this practice was the norm. People were supported to build and maintain important personal relationships that mattered to them; with peers, friends and relatives.

People were empowered to have their say and to exercise their rights. Access to an advocacy service was available and taken up when needed. Support was provided in a way which put the people and their preferences first. Healthcare professionals were regularly involved with people and the home.

The environment was very clean, modern and homely and maintained to a very high standard with personalised features throughout. Audits and monitoring systems were used effectively to manage the service and to make improvements when required.

There were enough staff to support people. Staff received support and a variety of appropriate and personalised training to meet people's needs. Medicines were managed well, safely administered and recorded accurately. Individualised risk assessments were in place. Staff were confident they would raise concerns to safeguard people. Robust recruitment and selection procedures ensured suitable staff were employed.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

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

The last rating for this service was Outstanding (28 May 2017).

#### 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?

Good ●

The service was safe.

Details in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective finding below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring finding below.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in the responsive findings below.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well led.

Details are in the well-led findings below.

# River Cottage

## 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

One inspector, carried out the inspection.

#### Service and service type

River Cottage is a residential care home. People in 'care homes' receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a registered manager. This means when registered 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 announced. We gave the home 24 hours' notice due to the small size to make sure there was someone home.

#### 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. The registered manager and provider were working closely with the local authority commissioners on improving the quality of the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spent time with people living at the service. We spoke with two people who used the service, one relative, the registered manager, team leader and three care staff.

We reviewed a range of records. These included two people's care records and two medicines records. A variety of records relating to the management of the service, including audits, procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to corroborate evidence found. We looked at training, audits, reports from external professionals and policies.

# 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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- People had both general and personalised risk assessments which were regularly reviewed.
- Where risks were identified, care plans showed ways in which staff could reduce these risks.
- Fire safety practices were in place along with regular checks to equipment.
- Regular maintenance checks, risk assessments and repairs were carried out to keep the home safe.

### Learning lessons when things go wrong

- Accidents and incidents were recorded on an individual recording basis. The registered manager analysed these to look for any patterns or trends and then took appropriate action to minimise risk of further incidents.

### Using medicines safely

- Medicine administration records were clear and completed fully.
- People received their medicines as prescribed, at the right time.

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

- Staff had received safeguarding training and were able to appropriately raise any concerns.
- Where safeguarding concerns had been raised, investigations and appropriate action was taken.

### Preventing and controlling infection

- The premises were very clean and tidy with no odours.
- Staff were provided with protective gloves and aprons where required and these were stored discreetly.

### Staffing and recruitment

- There were enough staff on duty to meet people's individual needs and maintain their safety.
- Staff were recruited safely, using robust checking methods to ensure only suitable people were employed.

# Is the service effective?

## Our findings

Our findings - Is the service effective? = Good

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 good. At this inspection this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The home was adapted to meet people's sensory needs with visual displays and modern personalised décor.
- The outside garden area of the home was accessible and well maintained.

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

- Outcomes for people, their preferences, care and health needs were assessed and regularly reviewed.
- Any changes to people's needs were reviewed with them and their relatives and this was reflected in their care plans.

Staff support: induction, training, skills and experience

- People were supported by staff who were appropriately trained. Staff told us they valued the training on offer and could ask for extra if needed.
- New employees completed an induction and shadowed more experienced staff as part of their induction.

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

- People's nutrition and hydration needs were met, and people were provided with a varied and nutritionally balanced diet.
- Staff were aware of people's dietary needs and people who required a specialist diet for example calorie controlled, were supported well and had good results.

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

- The service worked regularly with external professionals, such as social workers, psychiatrist and GPs to support and maintain people's health.
- People had detailed care plans covering their healthcare needs. These shared important information with healthcare professionals.

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

- Referrals were made to other healthcare professionals where appropriate, in a timely manner.

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 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.

- Health professionals completed capacity assessments to ensure people were supported appropriately to make decisions.
- Staff ensured people were involved in decisions about their care, they understood their role in making decisions in people's best interests. These decisions were in place for receiving support where needed.
- Where people did not have capacity to make decisions in an area of their life, they were supported to have maximum choice and control of their lives.
- People who could, were asked to give consent to their care and treatment; we saw this was recorded in care files.

# 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 good. At this inspection this key question has remained the same. 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

- There was a positive rapport between people, support staff and management. One person told us, "I like it here, I like all the staff they do good."
- People were supported to maintain personal relationships, to visit family and spend time with partners, peers and friends. One relative told us, "The staff are great with them."
- Staff were trained in dignity and respect. Staff treated people with kindness and respect at all times.
- People could be supported to follow their chosen religion and to attend their place of worship if they wanted.

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

- People were supported and had regular one to one meetings with their key worker to make plans and discuss any changes to their support; their relatives would be included if appropriate.
- People were supported to have their say and had independent advocate where required.
- Staff spent time listening and talking to people. We observed the relaxed atmosphere and mutual respect between people and staff.

Respecting and promoting people's privacy, dignity and independence

- People were actively supported to set goals to achieve increased independence.
- People were supported by staff to attend college to continue their education.
- People were supported to learn new skills. One relative told us, "I was really impressed, they had learned to pick up after themselves, this is a new thing. Something they never did when they were at home with us."
- Staff engaged with people in a dignified way. Private conversations and care were conducted respectfully.

# 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 outstanding. At this inspection the rating remains the same. Since the last inspection, the service had improved further and introduced new initiatives supporting individual's communication needs. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

### 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.

- Staff had taken innovative steps to meet people's communication needs which had improved their ability to communicate and make choices. For one person who didn't use words to communicate they were supported inclusively to use Makaton and symbols and this was used imaginatively around the home One relative told us, "It's the little things - but so much better they are doing things in the kitchen they couldn't do before because of the symbols."
- Innovative ways to support communication preferences were used. Fire safety notices were displayed (discretely) in keeping with the homely environment using specific symbols and colours. This improved safety. Previously one person was becoming very anxious and distressed. A member of staff told us, "They would just not take part in the drill (refused). Using the symbols, they can now."
- Communication needs were met individually and this had a positive impact on one person's life by minimising their frustration and anxiety. One member of staff told us, "I worked with [name] previously, I have seen a big improvement, they communicate much better now with the symbols, they will point and make choices - they couldn't before."
- Information such as people's goals, visual prompts and the menu was displayed creatively in photos and symbols. This was done in an age appropriate way and to blend in with the modern home décor.

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

- People's needs were always met to a high standard. Staff had an excellent understanding of people's need and care plans were exceptionally person-centred.
- People's feelings of wellbeing had improved as they were supported positively to manage their anxiety. Behaviours seen as challenging to the service were reduced and the need for staff physically hold people was no longer required. Using medicines to support people's anxiety had been eradicated.
- Exceptional results had been achieved through setting goals with people and consistently supporting them to have aspirations. One person's health had improved and they lost weight as a result in engaging in more activities and making healthier choices to meet their own goals.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow

interests and to take part in activities socially and culturally relevant to them

- People were empowered by sensitive care planning to learn and understand about their own personal feelings. For example exploring feelings such as bereavement.
- People were supported by staff to maintain friendships with peers and in the local community.
- People followed interests and took part in activities that were socially and culturally relevant to them including; active social club memberships, sporting events, educational, environmental projects and local community events such as bird spotting, litter picking and recycling. Staff had trained to be leaders at the Duke of Edinburgh awards to enable people to achieve their bronze awards. They were continuing this learning and focussing on achieving their silver award.
- Staff used their knowledge of people to suggest innovative ways to include them in activities. One person would previously refuse to join in some activities. A staff member told us, "They really wanted to be out more in the community. After lots of encouragement they started to visit a trampoline park but wouldn't join in. Now they go on the trampoline, because of the goal setting and planning they have built up trust and are more comfortable."

Improving care quality in response to complaints or concerns.

- A complaints procedure was in place and followed by the registered manager or staff when required.
- People and their relatives were supported to leave comments. Any issues from these were acted upon.

## 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 the last inspection this key question was rated as outstanding and at this inspection the rating remained the same. The service had continued to improve and support people to aspire and to achieve. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- The registered manager's creative approach to providing a person-centred culture and personalised service was recognised as an example of best practice by the provider. They would support and advise other managers within the region. The registered manager told us, (referring to clinical environments) "If you wouldn't want it in your own home then don't have it. People we support don't want it either."
- People's overall quality of life had improved following the registered manager being trained to a higher level in positive behaviour support. They had trained the staff team and supported them to implement this successful and effective approach consistently.
- The person centred culture and enabling staff approach resulted in people receiving high quality care and achieving their personal goals.
- Consistent high levels of constructive engagement with people gave them opportunities to be more involved and empowered in the running of their home from; choosing outings, décor and what to spend funds on. One staff member told us, "It's exactly how it should be – people are involved in everything, it's all about them."
- Staff were motivated and proud to work at the service. The registered manager placed a strong emphasis on continuous improvement and maintaining high levels of staff morale. They had introduced a star of the month scheme both for people and staff. They were rewarded if they won with an activity together and all costs covered by the provider. A cinema trip was planned for December's winners. An incentive was successfully introduced to reward staff who were not absent from work. This had improved sickness levels.

Working in partnership with others

- The service was an important part of the local community and had forged excellent links with organisations such as; local college and Princes Trust to access sporting events at Newcastle United football club. This had a direct impact on improving people's well-being by getting people to engage who would previously withdraw from activities.
- People were continually supported to be active citizens within their local community by using local services regularly. This included active volunteering roles, visiting social clubs, taking part in litter picks and recycling projects. These all had a positive impact on helping to meet their personal goals.

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

- The registered manager encouraged people and staff to be open with each other and created a culture of acceptance. They achieved high levels of satisfaction through excellent communication systems to keep staff, people and their families informed of what was happening via newsletters, phone calls and meetings.
- The culture at the home was to support people to practice their chosen religion if they wished and for staff to understand different cultural beliefs or preferences.
- The registered manager took on board opinions and views of the people to make improvements. They set up a 'make a wish box' a new coffee machine was bought for the home as requested and new board games and new ideas for activities.

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

- There was strong, clear leadership and regular audits were carried out by the registered manager to understand the quality and safety of the service.
- The provider had a plan to ensure minimal disruption to care in case of an emergency.
- Policies and procedures were current and in line with best practice.
- Surveys for people and their relatives were carried out regularly by the registered manager to check the quality of the service.
- The registered manager was open with the inspector during the inspection.