

Saint John of God Hospitaller Services

Saint John of God Hospitaller Services - 22 Sandown Road

Inspection report

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Date of inspection visit:
09 March 2017

Date of publication:
13 April 2017

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

We inspected Saint John of God Hospitaller Services – 22 Sandown Road on 9 March 2017. This was an unannounced inspection, which meant that staff and the registered provider did not know we would be visiting.

At the last inspection in December 2014, the service was rated 'Good'. At this inspection we found the service remained 'Good'.

The home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Saint John of God Hospitaller Services - 22 Sandown Road is a single storey, bungalow style service providing residential care for nine adults who have learning disabilities and may also have physical disabilities. The service is situated in a housing estate and is close to local amenities. At the time of the inspection there were nine people who used the service.

Staff understood the procedure they needed to follow if they suspected abuse might be taking place. Risks to people were identified and plans were put in place to help manage the risk and minimise them occurring. Medicines were managed safely with an effective system in place. Staff competencies, around administering medication, were regularly checked. Appropriate checks of the building and maintenance systems had taken place to ensure health and safety was maintained.

There were sufficient staff on duty to meet the needs of people who used the service. Staff were available to provide one to one support and with visits out in the community. We found that safe recruitment and selection procedures were in place and appropriate checks had been undertaken before staff began work.

People were supported by a regular team of staff who were knowledgeable about people's likes, dislikes and preferences. A comprehensive training plan was in place and all staff had completed up to date training. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. People were able to choose meals of their choice and staff supported people to maintain their health and attend routine health care appointments.

Care plans detailed people's needs and preferences and were person-centred. Care plans were reviewed on a regular basis to ensure they contained up to date information that was meeting people's care needs. People who used the service had access to a wide range of activities and leisure opportunities. The service had a clear process for handling complaints.

Staff told us they enjoyed working at the service and felt supported by the registered manager. Quality

assurance processes were in place and regularly carried out by the registered manager and registered provider, to monitor and improve the quality of the service. The service worked with various health and social care agencies and sought professional advice to ensure individual needs were being met. Feedback was sought from people who used the service through regular meetings'. This information was analysed and action plans produced when needed.

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 safe.

Is the service effective?

Good ●

The service has improved to Good.

Is the service caring?

Good ●

The service remains caring.

Is the service responsive?

Good ●

The service remains responsive.

Is the service well-led?

Good ●

The service remains well-led.

Saint John of God Hospitaller Services - 22 Sandown Road

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 registered 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.

We inspected the service on 9 March 2017. This was an unannounced inspection, which meant the staff and registered provider did not know that we would be visiting. The inspection team consisted of one adult social care inspector.

Before the inspection we reviewed all the information we held about the service. The registered provider had completed a provider information return (PIR). This is a form that asks the registered provider to give some key information about the service, what the service does well and improvements they plan to make.

We sat in communal areas and observed how staff interacted with people. We spent time with five people who used the service. Communication with some people was limited because of their learning disability. After the inspection we spoke with two relatives. We looked at communal areas of the home.

During the visit we spoke with the registered manager, service improvement manager, a senior support worker and five support workers. We also contacted commissioners of the service and other professionals who support people who used the service to seek their views. They did not report any concerns with the service. Their views can be read in the main body of the report.

We also reviewed a range of records. This included two people's care records, including care planning

documentation and medicine records. We also looked at two staff files, including staff recruitment and training records, records relating to the management of the home and a variety of policies and procedures developed and implemented by the registered provider.

Is the service safe?

Our findings

We asked people who used the service about safety, one person told us, "I like them [staff]." During the inspection we observed staff with people who used the service and saw staff were friendly in their approach and people were happy spending time with staff.

People were protected from the risk of abuse. Staff knew the various forms of abuse, signs to recognise them and what actions they would take to protect people. Staff understood their responsibility to report any concern should they suspect someone had been abused. They told us they would raise their concerns with the registered manager or service improvement manager and they believed prompt action would be taken to protect people. Staff also understood how to 'whistleblow' (telling someone) if necessary to protect people.

Risks to people's safety had been assessed by staff and records of these assessments had been reviewed. We were told that the registered provider promoted positive risk taking. Risk assessments had been personalised to each individual and covered areas such as health, behaviour that challenged, going out in the car, accessing the community and using public transport. We spoke with staff who were able to tell us how they carefully assessed one person's ability to use public transport. Staff told us how they would go out at quieter times as the person did not like crowds. They told us how they made sure the train was due in so the person did not have to wait as this would escalate behaviours that challenged. Whilst using steps at the train station there was a staff member in front of the person and one staff behind to steady the person and ensure safety. They told us how these measures helped to ensure the person's safety but also enabled the person to do an activity they really enjoyed. This meant that people were supported and encouraged to take responsible risks.

Recruitment procedures were thorough and all necessary checks were made before new staff commenced employment. For example, Disclosure and Barring Service checks (DBS). These are carried out before potential staff are employed to confirm whether applicants had a criminal record and were barred from working with people.

The registered provider had systems and processes in place for the safe management of medicines. Staff were trained and had their competency to administer medicines checked on a regular basis. Medicine administration records (MAR's) were completed correctly with no gaps or anomalies.

There was enough staff to support people's needs, with four to seven staff on duty at any one time. The number of staff on duty varied as during the day some people went to day services. Some people who used the service had also been assessed as having additional one to one hours and the duty rota identified which staff were to provide this one to one support. Staff told us there were sufficient staff on duty for people to do the activities they wanted to do or to go out into the community.

We looked at records which confirmed that checks of the building and equipment were carried out to ensure health and safety was maintained. The fire alarm was tested on a weekly basis to make sure it was in

working order. Water temperature of baths, showers and hand wash basins were taken and recorded on a regular basis to make sure they were within safe limits.

We saw documentation and certificates to show that relevant checks had been carried out on the fire extinguishers and the fire alarm. We asked to see Certificates to confirm testing of the gas boiler and electrical installation but these could not be found. The registered manager told us they would contact Stockton Borough Council who owned the building. The local authority could not find these certificates so arranged for the gas boiler and electrical installation to be tested after our visit. We have received confirmation of this testing.

Is the service effective?

Our findings

We spoke with relatives of people who used the service who told us staff provided a very good quality of care. One relative said, "The staff are absolutely amazing. You could not find any better care anywhere." Another relative said, "I think this is the best place [name of person who used the service] has come on loads."

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 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Where people lacked capacity to make decisions, staff told us they, other professionals and family had made best interest decisions, however, we noted there wasn't always a written record kept of this. After the inspection the registered manager sent us some decision specific MCA assessments and best interest decisions. The registered manager kept a tracker of all DoLS authorisation so these could be renewed in a timely manner.

Records showed care staff had received the training they needed to meet the needs of the people using the service. This training included health and safety, safeguarding, first aid, infection control, moving and handling, medication and fire training. Staff told us they had enough training to enable them to support people and meet their needs. One staff member said, "Our training is very good." Specialist training had also been completed for behaviour that challenges and this training had an emphasis on the approaches of positive behaviour support. In addition staff had received condition specific training and training on epilepsy.

Staff we spoke with during the inspection told us they felt well supported and that they had received supervision and an annual appraisal. Supervision is a process, usually a meeting, by which an organisation provide guidance and support to staff. We saw records to confirm that supervision and appraisals had taken place. A staff member we spoke with said, "I get supervision about every six weeks and I find it very useful."

We looked at the home's menu plan. The menus provided a varied selection of meals and choice. Staff told us they knew people very well and the food they liked and disliked. We saw how one person who used the service liked to go into the kitchen at each meal time to actually see the choices that were available. Staff told us how all food was home cooked and they supported people to make healthy choices and ensured that there was a plentiful supply of fruit and vegetables included in this.

We saw records to confirm that people had access to the dentist, optician, chiropodist, dietician, speech and language therapy, their doctor and other health and social care professionals as needed. Staff told us they had good relationships with the doctors and that they would visit people at home whenever they needed. After our inspection we e-mailed some professionals who were involved in providing the care and support for people. They wrote, 'In my experience they [staff] have been responsive, caring and liaise with our team well. They have been honest when they have struggled and engage with advice given from our team.' Another professional wrote, 'I have been visiting Sandown Road in the capacity of community nurse for

many years and have never experienced any issues of concern. [Name of registered manager] and the staff team have very positive relationships with the individuals that they support and they will always explore all possible solutions to problems that they are presented with. They are responsive in their practice and adapt to the individuals needs as required, and do this very effectively. They are also motivated to promote a high standard of care is delivered at all times.'

Is the service caring?

Our findings

People spoke positively about the care and support they received, and described staff as kind and caring. One person told us, "I like it [living at Sandown Road]." A relative said, "Sandown is such an amazing place with amazing staff. The staff treat everyone just like family. The staff care so much and go out of their way to make them [people who used the service] happy." Another relative said, "They care for [name of person who used the service] loads. This place has given him a new life." This relative told us how happy the person who used the service is since their move to Sandown Road.

We observed that staff and people had developed strong and meaningful relationships, and staff were able to tell us about people's backgrounds, preferences and interests. Care records had information about people's histories and background including education, family, social network, culture and individual preferences. Staff understood people's preferences and respected them. We heard staff address people by their preferred names and we saw staff supporting people the way they wanted. Staff understood people's communication needs. These were detailed in their care records and communication passports. We saw staff communicate with people very well using pictures, signs and facial expressions and body language.

Staff respected people's privacy and dignity and promoted confidentiality. Staff ensured people had their personal spaces and were able to enjoy quiet time as they wished. For example, one person returned from a visit to a cafe and was supported to lie on the bed in the sensory room. On another occasion staff adjusted a person's clothing to preserve their dignity.

We found that staff were very welcoming. The atmosphere was relaxed and friendly. Staff demonstrated a kind and caring approach with all of the people they supported. We saw staff actively listened to what people had to say and took time to help people feel valued and important. We saw that staff were able to understand the needs of those people who had limited communication and respectfully helped us to communicate with people and understand their views.

Throughout the day we saw staff interacting with people in a very caring and friendly way. Staff provided people with reassuring touches and used friendly facial expressions and smiled at them.

We looked at the arrangements in place to ensure equality and diversity and how the service supported people in maintaining relationships. Relatives told us they were always made to feel welcome and they attended parties and functions at the service which they very much enjoyed.

At the time of the inspection one person who used the service required an advocate. An advocate is a person who works with people or a group of people who may need support and encouragement to exercise their rights. We spoke with the advocate who told us, "From my experience staff have a good caring attitude." They also said, "With the right care and the right attitude [name of person who used the service] has blossomed."

Is the service responsive?

Our findings

Relatives and professionals told us they felt the service provided personalised care. One relative said, "They [staff] have made such progress with him. He is a different person and much happier. A professional said, "The service is very inclusive. [Name of person who used the service] has settled so well. When I last saw them she looked wonderful. There been a real improvement."

People visited the service on many occasions to have their needs assessed before they moved in. This enabled people and staff to get to know each other and to determine if the placement was suitable. For one person this wasn't possible so staff visited the person at their home. A staff team was set up from existing staff to support the transition. Initially staff from Sandown Road worked with staff at the person's other residential home. Over a four month period staff worked with the person gradually taking over their care. The person was unable to visit the service prior to moving in so the registered manager set up a welcome pack with pictures of staff and the home environment. The registered manager made sure that staff who had supported the person at their previous placement were on duty day and night when the person first moved in. This enabled the person to settle well.

We saw people received person centred care. This meant the service putting people at the centre of all decisions whilst working alongside other professionals to achieve the best possible outcome. During discussion staff told us how they carefully considered what people wanted, their values, family, lifestyle and treating the person as an individual. During our visit we reviewed the care records of two people. We saw people's needs had been individually assessed and plans of care had been drawn up. The care plans included people's personal preferences, likes and dislikes. For example the care plan for one person described in detail the type of clothes they like to wear. On the day of the inspection we saw that this person wore the clothes described in their care records.

Some people who used the service attended day services. The amount of time spent at day service varied for one person to another. At other times staff supported people with social activities and with their hobbies. One person told us they liked to go shopping with staff. We saw that people went ice-skating, swimming, out to café's and to the local pub for drinks and meals. The day before the inspection all of the people who used the service and staff had been for a meal out to the local pub to celebrate a person's birthday. We saw photographs which showed that people had clearly enjoyed themselves.

We saw photographs and spoke with a staff member who had taken one person on a recent holiday to Lanzarote. This person was seen to be enjoying their holiday floating on a lazy river and spending time in the pool. One relative said, "Since moving to Sandown [name of person who used the service] has never been out so much. He must feel like he is back with mam and dad as they always used to take him out. This is a great place."

Staff told us people who used the service and relatives were given a copy of the easy read complaints procedure when they moved into the service. We looked at the complaint procedure, which informed people how and who to make a complaint to. The procedure gave people timescales for action. There had

been one complaint made in the 12 months leading up to our inspection which the registered manager had responded to appropriately.

Is the service well-led?

Our findings

The home had a registered manager who was registered with the Care Quality Commission in May 2015. People who used the service told us they liked the registered manager and they were very approachable. One person said, "I like [name of registered manager]." Staff spoke positively about the registered manager, describing them as approachable and supportive. One member of staff told us, "[Name of registered manager] is great and so easy to talk to." Another staff member told us, "[Name of registered manager] has made such a difference. The service is not routine led there is now so much more flexibility. They [people who used the service] are supported to do so much more than before. Previously the kitchen door was always locked but now it is only locked when we are cooking meals. [Name of person who used the service] now regularly goes into the kitchen to choose their dinner and goes shopping with staff and likes to put the shopping away."

The registered manager was supported by a service improvement manager who visited the service on a regular basis. During these visits they carried out a baseline audit and monitored the quality of the service provided. The baseline audit was created around the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and during each visit, a number of different regulations were evidenced against.

The registered manager and other senior staff carried out a number of quality assurance checks, in areas including medicines, care planning, health and safety and staff files, to monitor and improve the standards of the service. It was noted that some of the checks were just a tick box so we were unable to determine the actual checks that staff were making. After the inspection the registered manager updated the audits to inform of the actual checks and sent a copy to us.

Regular staff meetings had taken place and minutes of the meetings showed that staff were given the opportunity to share their views. Management used these meetings to keep staff updated with any changes within the service and to provide feedback on recent inspections or compliance visits.

We looked at the culture of the service, including if it was open, transparent and accountable. Throughout the inspection staff were open and cooperative, answering questions and providing the information and documents that we asked for.

The registered manager understood their role and responsibilities, and was able to describe the notifications they were required to make to the Commission and these had been received where needed.