

Modus Care (Plymouth) Limited

Kazdin

Inspection report

Selway Lodge
Tamerton Foliot Road
Plymouth
Devon
PL6 5ES

Tel: 01752702105
Website: www.moduscare.com

Date of inspection visit:
21 February 2017

Date of publication:
23 March 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

Kazdin is a residential care home for up to three people. It specialises in the care of people who have a learning disability and associated conditions such as autism. Each person has their own self-contained living accommodation within the home.

Some of the people who lived in the home had limited communication and used other methods of communication, for example pictures and hand written questions. We therefore used these and observations to communicate with people.

At the last inspection, the service was rated Good.

At this inspection we found the service remained Good.

Why the service is rated good:

People remained safe at the service. There were enough staff to meet people's needs and support them with activities and trips out. Risk assessments were completed to enable people to retain their independence and receive care with minimum risk to themselves or others. This is particularly important for people who may challenge others. People received their medicines safely.

People continued to receive care from staff who had the skills and knowledge required to effectively support them. Staff were well trained and competent. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's healthcare needs were monitored by the staff and people had access to healthcare professionals according to their individual needs.

The staff were very caring and people had built strong relationships with the staff. We observed staff being patient and kind. There was a calm atmosphere in the service. People's privacy was respected. People where possible, or their representatives, were involved in decisions about the care and support people received.

The service remained responsive to people's individual needs and provided personalised care and support. People were able to make choices about their day to day lives. Complaints were fully investigated and responded to. One person told us "They met with the registered manager" to discuss any issues they had. People were assisted to take part in a wide range of activities and trips out according to their individual interests.

The service continued to be well led. Staff told us the registered manager was approachable. The registered manager and provider sought people's views to make sure people were at the heart of any changes within the home. The registered manager and provider had monitoring systems which enabled them to identify

good practices and areas of improvement.

Further information is in the detailed findings below

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remains Good

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good

Is the service responsive?

Good ●

The service remains Good

Is the service well-led?

Good ●

The service remains Good

Kazdin

Detailed findings

Background to this inspection

'We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.'

This was a comprehensive inspection, it took place on the 21 February 2017 and was unannounced.

Prior to the inspection we looked at other information we held about the service such as notification and previous reports. At our last inspection of the service in January 2015 we did not identify any concerns with the care provided to people.

During the inspection we met with two people who lived at the service. The registered manager was available throughout the inspection. Some people were unable to fully express themselves verbally. We looked around the premises and observed staff interacting with people. We also spoke with three relatives, one healthcare professional and three members of staff.

We looked at a number of records relating to individual's care and the running of the home. These included three care and support plans, three staff personnel files and records relating to medication administration and the quality monitoring of the service.

Is the service safe?

Our findings

The service continues to provide safe care. Some people who lived in Kazdin were unable to fully express themselves but appeared to be very relaxed and comfortable with the staff who supported them. Relatives told us they believed their relatives were safe living at the service. One relative said; "Definitely safe. I wouldn't want them to live anywhere else."

To minimise the risk of abuse to people, all staff undertook training in how to recognise and report abuse. Staff said they would have no hesitation in reporting any concerns to the registered manager and were confident that action would be taken to protect people. One person told us they emailed and talked with the registered manager regularly when they had any issues. This person said the registered manager always responded.

People's risks of abuse was reduced because there were suitable recruitment processes for new staff. This included carrying out checks to make sure new staff were safe to work with vulnerable adults. Staff were not allowed to start work until satisfactory checks and employment references had been obtained.

People had either one to one or two to one staffing to support them. There were sufficient numbers of staff to keep people safe and make sure their needs were met. Throughout the inspection we saw staff meet people's needs, support them and spend time socialising with them. Staff said additional staff were made available if they were needed to help people with specific activities or appointments.

Risk assessments were completed to make sure people were able to receive care and support with minimum risk to themselves and others. People identified at being of risk when going out in the community had up to date risk assessments in place. For example, where people may place themselves and others at risk, there was clear guidance in place for staff managing these risks. People had risk assessments in place regarding their behaviour. One person had a risk assessment which said they needed two staff to accompany them when they went out. During the inspection this person went out and we saw two members of staff accompanied them. This showed staff followed risk assessments to provide consistency for people and to keep them safe.

People received their medicines safely from staff who had completed training. There were systems in place to audit medicines practices and clear records were kept to show when medicines had been administered. Some people were prescribed medicines on an 'as required' basis. There were instructions to show when these medicines should be offered to people. Records showed that these medicines were not routinely given to people but were only administered in accordance with the instructions in place.

People were protected from the spread of infections. Staff understood what action to take in order to minimise the risk of cross infection, such as the use of gloves and aprons and good hand hygiene to protect people.

Is the service effective?

Our findings

The service continued to provide people with effective care and support. Staff were competent in their roles and had an excellent knowledge of the individuals they supported which meant they could effectively meet their needs.

People were supported by well trained staff. Staff told us they were provided plenty of training and in subjects relevant to the people who lived at the home, for example autism training.

People had their health monitored to make sure they were seen by appropriate healthcare professionals to meet their specific needs. For example one person told us how the staff had arranged for them to see a dentist after they had toothache.

People were able to make choices about the food they ate. Each person had their own menu, a kitchen to cook their meals and went shopping for their own food. One person told us, via a written question, that they had the food they liked and chose. Where there were concerns about a person's weight staff sought advice from relevant professionals.

Staff had completed training about the Mental Capacity Act 2005 (MCA) and knew how to support people who lacked the capacity to make decisions for themselves. Staff said people were encouraged to make day to day decisions. Where decisions had been made in a person's best interests these were fully recorded in care plans. One relative said they had been involved in a decision about their relative's care. Records showed an independent advocate and a healthcare professional had also been involved in making decisions. This showed the provider was following the legislation to make sure people's legal rights were protected.

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 MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The provider had a policy and procedure to support staff in this area. The registered manager had liaised with appropriate professionals and made applications for people who required this level of support to keep them safe.

People lived in a service that was well maintained.

Is the service caring?

Our findings

The home continued to provide a caring service to people. People had lived at the service for a number of years and had built strong relationships with the staff who worked with them. There was a calm and relaxed atmosphere and people appeared very comfortable with the staff working with them.

People had their own living area which they had been able to personalise to reflect their tastes and personalities. People had unrestricted access to these rooms and were able to spend time alone if they chose to. They were also able to spend time with their families in them. Families told us they visited regularly and also emailed and called their relatives when they wanted.

Staff knew people well and were able to communicate effectively with everyone. Staff used appropriate communication tools to ask people questions and people had photos/symbols to help them communicate decisions. This ensured they were involved in any discussions and decisions. Staff respected people's need for privacy. Staff supporting people were observed to be interacting well and appropriately.

People or their representatives were involved in decisions about their care. People had their needs reviewed on an annual basis and attended review meetings with staff from the service who knew them well. Personal representatives, for example family members or advocates and health care professionals also attended. Everything that happened in the person's own living area was discussed with them on an on-going basis. This ranged from their own care needs to redecoration of their living areas.

Staff understood people's individual needs and how to meet those needs. They knew about people's lifestyle choices and how to help promote their independence.

Is the service responsive?

Our findings

The service continued to be responsive. People were well known by the staff who provided care and support which was person centred and took account of individual needs and wishes. Staff told us how they encouraged people to make choices. Staff said some people were shown images while others had information written down. This helped ensure everyone's voice was heard.

People's care plans were personalised to each individual, contained information to assist staff to provide care and gave information on people's likes and dislikes. In addition to full care plans there were brief pen pictures of people, particularly about people's behavioural needs, which could be used by agency or new staff to make sure they had information about what was important to people. Staff had a good knowledge about each person and were able to tell us how they responded to people and supported them in different situations.

People took part in a variety of activities inside and outside of the service. People were provided two to one staff support whenever needed to partake in activities. On the day of the inspection one person had gone out for a walk, another had gone shopping and one person was due to start work in a local charity shop. People, with staff support, visited their family at their homes. Staff and relatives told us how staff regularly supported one person to visit a family member who lived some distance away. One person confirmed the activities they went on including shopping and visits to the park.

People had a complaints policy in picture format which gave them easy instructions about how to complain. The provider also had a complaints procedure displayed in the service in picture format to make it easy for people to understand. One person told us how they emailed or spoke to the registered manager if they were not happy with their care or support. Where complaints had been made these had been investigated and responded to. The registered manager had taken action to make sure changes were made if the investigations highlighted shortfalls in the service.

Is the service well-led?

Our findings

The service continues to be well led. There is a registered manager in post. 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.

The registered manager had clear values and a vision for the service which was to make sure the service was person centred and provided a stimulating and enabling environment for people. The vision was supported by the provider and communicated to staff through day to day discussions, one to one supervisions and team meetings. Staff we spoke with were very positive and enthusiastic about the work they did.

The registered manager was well respected by staff and relatives. They were open and approachable and keen to make improvements where necessary. From discussion with one person it showed they were extremely comfortable talking to them. The registered manager kept their practice up to date with regular training. They had completed a management and leadership course. They also met with other managers of the company that own Kazdin, for additional support.

When the registered manager was not available there was an on call system available between the company's other services. This meant someone was always available to staff to offer advice or guidance if required. Staff told us they felt well supported by the registered manager and the provider.

The provider had systems in place to make sure the building and equipment were maintained to a safe standard. These included regular testing of the fire detecting equipment and hot water and servicing of equipment.

The registered manager was visible in the service and their time was divided between office time and time spent delivering care. This enabled them to work alongside other staff to monitor practice and address any shortfalls. There were effective quality assurance systems in place. There were regular audits of the property and care practices which enabled the provider to plan improvements.