

# Chaos Support Ltd

# Stonecroft

## Inspection report

8 Leigh Road  
Havant  
Hampshire  
PO9 2ET

Tel: 02392472061

Website: [www.chaossupport.co.uk](http://www.chaossupport.co.uk)

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### 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

This inspection took place on 13 February 2017 and was announced. This was the first inspection of this service since it became registered with CQC in March 2015.

Stonecroft is a service which provides short stays (respite) to younger adults who are living with a learning disability and some complex health conditions. It is registered to support up to five people at any one time. The provider told us they had taken the decision not to support any more than four people as they felt this worked better for the young people who accessed the service. Stonecroft was referred to by the people using it and staff as 'The Hotel'. The registered manager told us this helped people to understand it was a break for them. The Hotel was situated above the a day service (an unregulated service) which was run by the provider and was separate to the day service.

A registered manager was 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 was also a director of the company and the nominated individual.

People were safeguarded from harm as the provider had systems in place to prevent, recognise and report any suspected signs of abuse. Medicines were managed safely and risks associated with people's needs had been assessed with plans developed to mitigate such risks. People could be confident they were being cared for by staff appropriate to do so because the provider operated safe recruitment processes and ensured there were enough staff available to meet people's needs.

Staff felt well supported and received the training they required to effectively support people. People had access to a range of health and social care professionals and staff acted on specialist advice given when planning and delivering care and support.

Staff knew their responsibilities as defined by the Mental Capacity Act 2005 (MCA 2005) and Deprivation of Liberty Safeguards (DoLS) and had applied that knowledge appropriately. They understood the importance of obtaining people's consent when supporting them with their daily living needs.

People were supported by staff who knew them well and demonstrated kind, compassionate care. They were involved in decisions about their care and support. A person centred service was provided where people could decide how they spent their time while at The Hotel. Care plans reflected people's needs and staff responded well to people.

A complaints policy was in place and people knew how to use this if they needed to. The provider responded appropriately to complaints.

The registered manager and director were visible in the service and were consistently described in a positive manner. Systems were in place to use information gathered to learn lessons and make improvements where 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 was safe.

Staff and the management team understood their responsibilities in safeguarding people from harm. People were kept safe through risks being identified and well managed.

Medicines were well managed with people receiving their medicines as prescribed.

There were sufficient staff to keep people safe. Staff were recruited safely.

### Is the service effective?

Good ●

The service was effective.

Staff received the support and training they needed to work effectively with people.

Staff understood the need to ensure people were supported to make their own informed decisions.

Where people needed support with specialist diets this was provided and staff accessed other professionals to ensure support provided was appropriate for people's needs.

### Is the service caring?

Good ●

The service was caring.

People were supported by staff who were kind and caring.

People, or their representatives, were involved in decisions about their care and support.

Staff demonstrated an understanding of respect, privacy and dignity.

### Is the service responsive?

Good ●

The service was responsive.

People received care and support that took account of their needs and wishes.

There was a clear complaints policy and people knew how to use this. People were encouraged to share their feedback.

**Is the service well-led?**

**Good** ●

The service was well led.

People benefitted from a registered manager and senior staff team who were open and approachable.

People's quality of care was monitored by the systems in place and action was taken to make improvements when necessary.

# Stonecroft

## **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.

The inspection took place on 1 February 2017 and was announced. The provider was given short notice because the location does not always provide support and we needed to be sure that someone would be in.

The inspection team consisted of one inspector.

Before the inspection we reviewed information we had about the service, including notifications the provider had sent to us. A notification is information about important events which the provider is required to tell us about by law.

During the inspection we spoke with two people who used the service and two staff. We spoke to the registered manager and a director of the company. We observed the care and support people received in the shared areas of the home.

We looked at the care plans and associated records of two people, medicines administration records, four staff recruitment records and supervision records. We looked at staff training records, records of complaints, accidents and incidents, policies and procedures, safeguarding and quality assurance records.

Following the inspection visit we spoke to two relatives and a further two staff.

# Is the service safe?

## Our findings

People told us they loved it at The Hotel and relatives confirmed they felt people were safe because staff understood their loved ones needs.

Staff had been provided with training on how to recognise abuse and how to report allegations and incidents of abuse. Policies and procedures were available to everyone who used the service. The registered manager and staff recognised their responsibilities and duty of care to raise safeguarding concerns when they suspected an incident or event that may constitute abuse. There had been no safeguarding concerns within The Hotel, however the provider was able to tell us learning they had taken as a result of a safeguarding within another of their services. This included ensuring prompt reporting to all external agencies.

Staff knowledge of the people they supported was good, they understood their needs and any risks associated with their support. People were supported to take risks to maximise their independence. Comprehensive care plans were in place to guide staff to the support the young person required whilst staying at The Hotel and how to manage any risks associated with their care. For example, how to manage specific behaviours, nutritional needs and some complex health needs. The registered manager and staff told us how people and their families were encouraged to participate and keep these plans updated. We saw changes to plans were made as soon as the service were aware of the young person's change in need.

People's medicines were safely managed. There were clear policies and procedures in the safe handling and administration of medicines. Medicines were stored in a locked cupboard in a locked room. Records were available to guide staff to the medicines a person was prescribed. Medicines were counted and signed in when the young person arrived at The Hotel and they were counted and signed out to families or carers when the young person returned to their home. Staff confirmed they received training and completed competency assessments before being able to give medication.

The number of staff needed for each shift was calculated using the hours contracted by the local authority. Staff confirmed there were sufficient numbers of staff on duty. Each person was allocated a staff member and the same staff were consistently used to ensure continuity for people who used the service.

New employees were appropriately checked through the provider's recruitment processes to ensure their suitability for the role. Records showed us people had a Disclosure and Barring Service (DBS) check in place and references were sought. A DBS check allows employers to see if an applicant has a police record for any convictions that may prevent them from working with vulnerable people. We looked at records for four staff which evidenced staff had been recruited safely. However we noted that at times it appeared staff started work prior to these checks being received. The provider told us that no staff worked alone with people until these checks had been returned and the staff had undertaken a thorough induction which lasted approximately 4 to 6 weeks. Staff confirmed this.

## Is the service effective?

### Our findings

Relatives felt staff were knowledgeable and well trained. Staff said they received a lot of training that supported them in their role and was personalised towards the people they supported.

The registered manager, director and staff described a comprehensive induction period undertaken for all new staff. This included a period of time spent shadowing staff, getting to know the young people whom the provider supported, undertaking training, completing assessment workbooks and being assessed as competent. Staff completed a three month probationary period where the provider checked if they were performing to a suitable standard. Training needs were identified based on the needs of the young people the provider supported. All staff were required to complete certain training courses which included areas such as safeguarding, Mental Capacity Act and DoLS (Deprivation of Liberty Safeguards), moving and handling, diabetes, and specialised nutritional feeding. Staff told us they received supervisions which they found helpful and supportive. They told us these meetings were a two way discussion where they could share concerns or make suggestions.

The registered manager, director and staff told us how they were encouraged and supported to undertake additional vocational qualifications after a successful three month probation period.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are 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 were being met.

No DoLS applications had been made as these were not needed. Staff understood the principles of the MCA 2005 and ensuring that the young people they supported were given choices and supported to make informed decisions of their own. They told us how they respected people's decisions but at times needed to work with them to ensure people understood how to make safe decisions. Young people who stayed at The Hotel were able to make decisions about how they spent their time whilst staying there and staff supported them to achieve this.

People chose the food they wanted and were supported by staff to assist with food preparation if possible. The person staying at The Hotel on the day of our visit had been provided with two options before making their choice. Staff were aware of how this person's dietary intake could impact on their health condition and the support this person required to manage this. Two people we spoke with told us the food was, "Great".



Where people required a specialised nutritional intake such as their food via a feeding tube, staff had been trained to do this and told us the care plans in place provided them with the guidance they needed to do this safely. They told us if they wanted more training on this they could always ask. Food and fluid monitoring took place where this was needed and the information recorded during the persons stay at The Hotel was then shared with their family or carers.

The registered manager, director of the company and staff told us how they sourced the support of multiple external professionals for people when this was required. This included behaviour specialists, social workers and community nurses. Day to day health appointments took place when people were not staying at The Hotel and information from these was shared by families to ensure staff had the information they needed.

## Is the service caring?

### Our findings

People we spoke with described staff as their friends. They told us they enjoyed the staff's company and felt they were treated well. Relatives confirmed this and said staff were kind and caring. They told us their loved one's really enjoyed their time at The Hotel and often wanted to spend more time there.

People were supported by a consistent team of staff which ensured continuity and enabled the person to get to know the staff. Observations reflected people were comfortable and relaxed in staff's company. They engaged positively throughout our visit, laughing and joking with staff. We found the atmosphere in the service was warm and friendly.

The registered manager and a director of the company explained the service's values and told us that the service existed to support people to become more confident, skilled and independent whilst reflecting their right to make their own choices and decisions. Staff discussions reflected this was the support they provided.

We saw people were asked throughout their stays what they wanted to do and were given choices and options about all aspects of their stay. People told us they made their own decisions and staff supported these.

The registered manager informed us and people and relatives confirmed they were provided with opportunities to discuss their care needs during their assessment prior to their service being set up. They confirmed regular reviews of their needs took place. Staff showed a good understanding of people's needs and their wishes. The provider had allocated a staff member to be responsible for the provision of communication systems within the service. This supported them to ensure that they had the tools needed to communicate effectively with people at all times. Multiple communication aids were seen during our visit.

We observed that all personal and confidential information was appropriately stored and only those people who were permitted to access it could. We observed staff members encouraging people to remain independent and carry out activities of their choice. Staff demonstrated a good understanding of the need to respect people's dignity and privacy. Staff used people's preferred form of address, showed them kindness, patience and respect.

## Is the service responsive?

### Our findings

One person described The Hotel as "Brilliant" and said they "loved" spending time there. Relatives told us they felt confident and sure their loved ones enjoyed this and wanted to spend time at The Hotel.

There was a very person centred ethos in the home which meant staff responded to people on an individual basis and worked in accordance with people's wishes. Each person had their needs assessed before they used the service to make sure the service was appropriate to meet the person's needs and expectations. Following the assessment comprehensive care plans were developed and agreed with people and/or their representatives. The provider ensured that staff had the training needed to support people before the service commenced and where this involved seeking support from other professionals they did this.

People received a personalised service that met their needs. Staff's knowledge of people's needs, their likes and dislikes was good. Relatives told us they felt staff understood their loved ones needs and provided support in a way which helped them to feel valued. When people arrived for a stay at The Hotel staff asked them what they wanted to do and achieve during their stay. For the person who was staying the night we inspected they had chosen to practice for an upcoming talent show and to watch DVD's with staff. The people who accessed The Hotel were encouraged to be as independent as possible and received staff interventions on request or when a person's assessment identified that support was required. Staff knew people's needs, preferences and responded with confidence when care or communication was required. Care plans were person centred and provided staff with information about people's care and health needs as well as their choices and goals whilst using the service. Activities on offer were based on what people wanted to do and liked. For example, staff told us if a person wanted to go to a nightclub, following risk assessment this would be supported. People told us they did what they wanted and their choices of activities were always supported.

Relatives were confident that should staff need to respond to a changing health need that they would do this. One told us how about their loved ones health condition. They said following a change regular discussions with staff and management at the service took place to ensure care plans were accurate, updated and reflected the person's needs.

The provider sought feedback from people and their relatives following visits. One relative told us how they were given a feedback form to complete, whilst a second told us they are regularly asked and provide verbal feedback. People told us they are asked if they like the service. There was a complaints procedure in place. People and their relatives knew how to raise a complaint but said they had not needed to. Records showed when concerns had been raised the provider had taken appropriate action to investigate the concerns and learn from these. Examples of changes made as a result included a clearer handover processes when people arrived at The Hotel.

## Is the service well-led?

### Our findings

The registered manager and director were consistently described in a positive manner by staff, people and relatives. They were described as open, easily accessible, welcoming and easy to talk to. One member of staff said, "I think they live and breathe this place". Everyone said they wouldn't hesitate to talk to the registered manager or director. They were confident if they raised concerns or made suggestions these would be acted upon. They felt the registered manager and director listened to them and to people using the service. One member of staff said, "I always feel appreciated and valued".

The registered manager and director described the ethos of the service which they told us was to provide person centred care which enabled people to live as they wanted. During the inspection staff gave evidence which showed this ethos was shared and staff worked hard to enable people to make choices about their lives. People were continually asked what they wanted and offered choices throughout their stay.

There was a staffing structure which provided clear lines of responsibility and ensured people's care was always overseen by an allocated member of staff. In addition to the registered manager there was an assessment team, a hotel coordinator, team leaders and senior staff. Staff clearly understood their roles and responsibilities and the provider supported staff to develop their knowledge and skills for the benefit of people who used the service. Staff had allocated roles in addition to delivering support and the provider supported them to understand these roles and develop within them. Staff said they were encouraged to share concerns and make suggestions which they felt were listened to. For example, a change in the frequency of team meetings had taken place to ensure that all staff were now able to attend and contribute.

Staff told us they "loved" their jobs and felt well supported by the registered manager and other senior staff. They told us the registered manager and director were very hands on in their roles and always available to provide direct support if needed. They said supervisions gave them an opportunity to discuss their work and highlight any training or development needs. They were also a chance for any poor practice or concerns to be addressed in a confidential manner. Staff said they could raise any issues or training requests at their supervisions and they always felt listened to.

All incidents and accident records were analysed and part of the analysis involved looking at lessons that could be learnt. Recommendations were made following the investigation and analysis and actions taken as a result. For example, an increase in body maps for one person had led to a change in equipment. A high level of behavioural incidents over a weekend had resulted in a review of the compatibility of people using the service at any one time.

Whilst audits of care plans were not formally undertaken staff, the registered manager and relatives told us these were kept regularly under review and updated when needed. The information was communicated to all staff at the same time to ensure they knew any changes that had been made.

The registered person had notified the Care Quality Commission of all significant events which had occurred in line with their legal responsibilities. They advised us this was a learning point for them following an issue

in another of their services which they had ensured they implemented.