

Autism East Midlands

The Poplars

Inspection report

The Poplars
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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 17 August 2016 and was unannounced.

The Poplars is owned and managed by Autism East Midlands. The service is situated in Whitwell, Derbyshire, and provides care and support for up to five people over the age of 18 years with learning disabilities and autism. At the time of this inspection there were five people living at the service.

At our last inspection in May 2015 the service was not meeting two regulations. These were in relation to protecting people from risks to their safety and assessing and monitoring the quality of service provision. Following the inspection the provider sent us their action plan to tell us about the improvements they were going to make. At this inspection we found improvements had been made.

There was a new manager in post at The Poplars. The manager had been newly appointed and had begun the process of applying to become the 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.

The service was safe, clean and well maintained. Medicines were stored, administered and managed safely. Staff received appropriate training and assessment took place, to ensure their practice was safe when administering people's medicines.

There were effective systems in place to safeguard people and keep them safe. Staff recruitment procedures were in place and followed. Pre-employment checks were undertaken to ensure staff were able to work within the care sector. People using the service and the staff supporting them knew who to report any concerns to if they felt it was necessary.

People were supported to access health professionals when they needed to. People were encouraged to remain as independent as possible and were supported to by staff to prepare meals and drinks of their choice.

People were supported and involved in decisions made in their best interests. The staff had received training in the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). When required, applications had been made to the local authority for assessment and authorisation.

People were supported by staff who were kind, caring and compassionate. Staff treated people with dignity and respect. People were supported to remain as independent as possible. People's relatives were supported to maintain contact with their family member. People were supported to have access to a variety of communication aids to support them in their daily life. Staff showed consideration for people's individual needs and provided care and support in a manner that respected individual wishes and preferences.

The provider had auditing systems and checks in place to ensure the service was safe and of good quality. There was a positive, open and inclusive culture at the service. Staff felt supported by the management team at the service. Staff received supervision and support from the management team. There were enough staff with the right skills and experience to meet people's needs. Staff received training which enabled them to provide people with safe care and support.

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.

Improvements have been made to the safety of people living at the service. There were enough staff at the service to meet people's needs and the provider's recruitment procedures were safe. People's medicines were managed in safe manner.

Is the service effective?

Good ●

The service was effective.

People were supported by staff and relatives to access healthcare professionals when it was necessary. Staff worked with and understood the key principles of the Mental Capacity Act 2005. People were supported by staff to prepare meals and drinks of their choice. Staff

Is the service caring?

Good ●

The service was caring.

Staff were kind, caring and compassionate; people were treated with dignity and respect and staff respected people's right to a family and private life. People were supported to have access to a variety of communication aids to support them in their daily life. Staff showed consideration for peoples' individual needs and provided care and support in a manner that respected individual wishes and preferences.

Is the service responsive?

Good ●

The service was responsive.

The service was responsive to people's needs; people were supported by staff to attend and take part in activities of their choosing. People and relatives were involved in the development of care plans; care was focused around the needs of people. There was a procedure for compliments and complaints; any complaints were acted upon.

Is the service well-led?

Good ●

The service was well-led.

There was a system of monitoring and auditing the service people received. Relatives were complimentary and felt the service had improved. People's relatives spoke highly about the service provided. Staff told us they felt supported and had regular supervision and appraisal with a member of the management team.

The Poplars

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 was planned to check 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 inspection took place on 17 August 2016 and was unannounced. This inspection was completed by one inspector.

Before the inspection, we reviewed the information we held about the service. We contacted the local authority contracts and commissioning team and also reviewed notifications and safeguarding alerts. A notification is information about important events which the service is required to send us by law.

We asked the service to complete a provider information return (PIR). This is a form that asks the provider to give us information about the service, what they do well, and what improvements they are planning to make. This was completed and returned to us by the service.

We spoke with four people who used the service. We also spoke with two relatives, a social care professional to obtain their views about the service. We spoke with four staff, which included the new manager.

We reviewed a range of records about the people at the service along with documents in relation to how the service was managed. This included three people's care plans, three staff recruitment records, training records and records in relation to the safe management of the home, such as audits and environmental checks.

Is the service safe?

Our findings

At our last inspection in May 2015, we found people were not protected from risks to their safety. This issue was a breach of Regulation 12 of the Health & Social Care Act 2008 Regulated Activities Regulations 2014. Following the inspection the provider sent us their action plan to tell us about the improvements they were going to make to rectify the breach. At this inspection we found the improvements had been made.

At the last inspection floors in bathrooms were wet and slippery. At this inspection we saw floors had been cleaned and mopped to protect people from the risks of slipping and falling. We found carpets had been replaced and decoration had taken place in bedrooms where it was required. People's bedrooms were tidy and reflective of their personal choice. There were daily and weekly cleaning schedules in place and these had been completed.

People and relatives told us The Poplars was safe. One person said, "We have lots of new staff; they are much better. Yes, I am safe." A relative said, "We used to worry for the safety of [person's name], but things have really improved." They went on to say, "[Person's name] is definitely safe." A staff member said, "Service users are now safe living at The Poplars; there are systems in place to ensure people are safe." We asked the staff member what they meant by this and they explained, "We have an open culture and robust safeguarding process." The staff member went on to say, "The group of service users means they are much safer than before."

People, relatives and staff were encouraged to voice any worries they may have and felt any concerns would be taken seriously. Staff understood how to keep people safe from potential abuse; they recognised the need to put measures in place to protect people from harm. Staff were aware of how to raise any concerns about people's care; staff also knew who to share concerns with. Staff and the management team felt confident to share and report any concerns with the local authority and the Care Quality Commission (CQC), and this was confirmed by a social care professional. We saw there was information displayed in the service for everyone to refer to if they were worried about people's safety or care.

Since our last inspection, people's care plans and associated documents had undergone a full and extensive review. The revised records contained comprehensive information and risk assessments relating to how to support people in a safe and consistent manner. People and relatives had been included in the compiling of their care plans. Staff were familiar with people's care records and risk assessments and used them to assist with supporting people in a safe manner.

People and relatives told us they thought there was enough staff to meet their needs. A relative said, "There's always staff to take [person] out and about." Staff members we spoke with told us there had been a recruitment drive by the provider which had resulted in improved staffing levels. Staff told us staff levels were suitable and sufficient to meet people's needs. A staff member said, "There is definitely enough staff; we are able to provide service users with consistent and safe care because we have the right staff."

During our inspection visit we saw people participated in activities of their choice and staff levels enabled

this. One person chose to attend an activity in the community with other people who lived at the service. Staff reported that whilst there the person became anxious and wanted to return to The Poplars. Staff levels meant the person was able to return as they had requested. We reviewed staff rota's and found the staff levels were reflective of people's needs.

People received their medicine from staff who had completed training and assessment to help ensure their practice was safe. One person told us, "Staff do my tablets and that's fine by me." People were happy and content for staff to manage and administer their medicines. We observed staff supporting people to take their medicines in a safe manner. We heard staff explain to each person what each of their medicines were for. We saw a staff member take time to count each tablet with one person to confirm they were correct. Another person was prescribed a cream and the staff ensured the person was involved with its application; staff advised the person where the cream needed to be applied. Relatives felt staff provided their family member their medicines in a safe and timely manner.

We looked at the management of medicines, including the provider's policies and procedures. We saw medicine administration records (MAR) were completed by staff after they had given people their medicines. We also saw the MAR charts had been appropriately completed each time medicines were given to people. We spoke with a staff member about how they ensured people were safe in relation to medicines administration. The staff member told us, and we saw, two staff worked together to give people their medicines. The staff member told us, "If there's two staff available, then two staff do the medicines; It is good practice and safe to have a witness." This showed staff ensured good and safe practice was followed in medicines administration.

Systems and process were in place to ensure people were supported to remain safe in the event of an unforeseen event or emergency. The provider had up to date personal emergency evacuation plans for everyone at the service. These contained key information about how best to support people in the event of an emergency, such as a fire evacuation.

Is the service effective?

Our findings

People received support and care from staff who knew them well. One person told us, "The staff look after us and help us." Staff were able to give us detailed information about the people they supported.

People received care and support from staff who had received training deemed necessary by the provider. One staff member told us, "We get to go on loads of training." They continued and told us, "By attending training I am able to put the knowledge into practice." They gave an example of being aware of signs to look out for if someone was becoming anxious and how best to support them in a manner which was least restrictive and supportive. We reviewed the staff training records and found them to be complete and reflective of the needs of the people living at the service.

We saw new members of staff completed an induction and a period of shadowing alongside an experienced member of staff. A member of staff said, "New staff have an induction period, probation and at least two weeks when they shadow regular staff until they feel confident and competent." There was an expectation of the provider that new staff undertook the Care Certificate as part of the development of their caring role; we saw training records which supported this. The Care Certificate identifies a set of care standards and introductory skills that non-regulated health and social care workers should consistently adhere to. This showed the provider recognised the need to ensure staff had the necessary training and skills to meet people's needs.

We saw, when required, capacity assessments had been completed; people's views and beliefs had been sought and taken into account in relation to best interest decisions. There were procedures and guidance available in relation to the Mental Capacity Act 2005 (MCA). The 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.

We asked staff to tell us what they understood about the MCA. Staff told us they received training about the MCA. One staff member told us, "We (staff) must always assume a person has capacity to make their own decisions, unless an assessment proves otherwise." The staff member went on to say, "We must always work with people in a way which is least restrictive. We (staff) give service users information to help them to make their own decisions." This showed the service was working within the principles of the MCA.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We saw appropriate applications had been made to the local authority's DoLS team.

People were supported to attend appointments with health care professionals. At our inspection visit one person was supported by a staff member to attend a hospital appointment. The person's relatives also

attended the appointment. The relative said, "The staff come and pick us up so we can attend appointments." The relative described how the staff had supported them and their family member through a recent planned treatment. The relative told us how their family member needed medical treatment and the staff ensured this was carried out with the person's best interests at the forefront. Staff described to us how they had worked with the person, their relatives and health professionals to look at the best and least restrictive way of coordinating the treatment. This helped to show the staff and provider understood the need to work with people, relatives and professionals to ensure people received the treatments needed.

People required assistance with meal preparation. They said the staff were, "Really good at cooking." They went on to say, "The staff do the cooking and I sometimes help." Another person told us, "We get lots of nice food; we get lots of choice." We saw there was a menu which offered people two main choices. A member staff told us the menu was there as a, "Rough guide for shopping." Another staff member told us, "We use the menu as a starting point, but service users still have a choice. " They went on to say, "If someone doesn't want what is on the menu, it's not a problem; people can, and do, change their mind." We reviewed records and saw people ate a varied diet which reflected individual choice and preference.

Is the service caring?

Our findings

People told us staff were caring. One person told us, "The staff are nice; they look after us." Another person told us, "Staff help me; it is really good living here." A relative said, "Staff are really approachable and helpful; the staff really do care." The relative went on to say, "The staff are wonderful and absolutely fantastic." Another relative said, "The staff are very caring; they are very, very good."

Staff were aware of ensuring people were treated with dignity and respect; staff respected people's right to privacy. For example, one person chose to have a bath, however they did not want to get out for quite some time. The staff recognised the person wanted to spend time alone, enjoying and relaxing in the bath. Staff were aware of respecting the persons wish for privacy along with maintaining their safety. We saw staff periodically and discreetly checked on the person and ensured they were safe. Each time, staff were heard to ask if the person was ready to get out of the bath or did they want to stay in longer.

Staff supported people to maintain contact with their families and friends. One relative told us, "We can visit [person's name] at The Poplars when we like." They went on to say, "We know [person's name] is well looked after and cared for by the staff and that gives us comfort and re-assurance."

The culture of the service was one where staff did things with people rather than for them. Staff were motivated and supported people to maintain their independence and skills. Staff included and involved people in day-to-day routines and household tasks. For example, meal and drink preparation was a joint activity with people and staff working together. This helped to support people to maintain their independence.

We observed how staff interacted with people. We saw meaningful relationships had developed between people and staff; this included laughter and conversation. The staff took time to ensure people understood what was happening in a friendly and reassuring manner. As not all the people communicated verbally, we saw staff used different approaches and skills to ensure they and the person understood. For example, we saw one person communicated with simple signs, symbols and pictures. The staff recognised this person's individual communication needs and ensured the communication system was freely available and understood.

We also saw one person had been supplied with assistive technology to help them understand what was happening. The technology helped the person achieve their goals and supported them to learn how to deal better with the challenges of day-to-day life. During our inspection another person was working with staff towards them trying the assistive technology to support them in their daily life. This showed the provider and staff communicated and worked in a variety of ways, to ensure people had the correct level of assistance and aids to support their needs.

We saw and heard staff supported people in a kind, caring and compassionate manner. During our inspection visit we saw and heard staff interacting with people in a manner that reflected their individual needs. Staff avoided rushing people and gave them the opportunity to make decisions and choices. Staff

recognised the importance of building and maintaining trusting relationships with people through shared experiences. Staff took time to ensure they understood people's wishes and preferences. They acknowledged the importance of promoting people's self-esteem and diversity and supported them to dress in a manner that reflected their personality and choice.

Is the service responsive?

Our findings

On our arrival at the service we were quickly greeted by a person who lived there. They told us they were off out to their chosen activity and were really looking forward to it. They went on to tell us, "It is good living here; I am happy and I am going out with [staff name]. I'm going to play snooker and bowling."

People told us they were able to take part in activities of their choosing. One person told us, "I've been to Boccia (bowls) today and I won." Another person told us, "I go horse-riding and help with mucking out." We saw a collection of photographs had been printed of people and staff working together making buns. One person said, "We made some buns the other day and we got to try them; they were nice." A staff member said, "We ran a food tasting session here a few weeks ago." They continued by saying, "It was a really good way of getting service users to try different things; it is fun and inclusive and we all give things a go." We also saw there were some bespoke and original art works displayed in the lounge; these had been completed by people who lived at the service. This showed people were encouraged to follow personal interests.

People's care plans had been through a complete and extensive update and overhaul. People's care plans had been developed with their assessed needs and views incorporated. This included information relating to people's preferences, interests, goals and aspirations. The quality assurance lead told us the new care plans were designed to be people focused as well as user friendly.

Staff demonstrated an understanding about person centred care and ensured the needs of people living at the service were first and foremost. The staff and the manager told us how important it was the service reflected the needs of the people it supported. We heard staff responding to people in a manner which was consistent with their care plans. When people asked for help or assistance, staff promptly responded to requests.

The staff we spoke with recognised the individual needs and personalities of each person living at the service. We saw how each person's bedroom reflected personal choice and personality. One person wanted to show us their bedroom. They told us how their bedroom was their own personal space. They went on to show us framed photographs of special events and personal interests. This showed people received personalised care, which was responsive and reflective of their personal preferences and choices.

We saw the provider had a complaints procedure in place. People told us they knew how to make a complaint and they were confident they would be listened to and any issues or concerns they raised would be acted upon appropriately. A relative told us they had previously been worried about their family member, but felt much more reassured. They said, "We had some concerns, but things are much better." The relative told us the staff and provider had listened and acted upon their concerns. We saw the service had received one complaint from a relative, who had specific requests for their family member. We saw the service had taken action to resolve the issue and outcomes of actions had been documented.

Is the service well-led?

Our findings

At our last inspection we reported a breach of Regulation 17 of the Health & Social Care Act 2008 Regulated Activities Regulations 2014. This was in relation to a lack of effective systems to assess and monitor the service. Following the inspection the provider sent us their action plan to tell us about the improvements they were going to make to rectify the breach. At this inspection we found the improvements had been made.

The provider had implemented a system of quality monitoring and auditing, which was used to identify areas for the improvement of the service. The auditing framework identified a specified area for assessment, for example, equipment and whether it is suitable, fit for purpose and any actions necessary. Senior managers complete, 'spot audits' which sets out actions and these are then followed up by the office staff, who alert staff that action is required in a timely manner. Any actions and recommendations from the audits were carried out and dated as and when completed; we saw records confirmed this.

Accident and incident documentation was completed and used to learn from and to identify any trends. A number of environmental and health and safety checks took place to ensure people were provided with a safe environment to live. We saw care plans and risk assessments were reviewed and updated as and when necessary. We had been notified of significant events and incidents as is required. This included events affecting people's safety.

The service had a new manager who had started the process of registering with the Care Quality Commission (CQC). Staff told us the service had gone through many changes since the last inspection in 2015 and they all saw the changes as beneficial. One staff member told us, "The service has really developed over the past year." They went on to tell us, "[New manager] is really on board and is and will be very positive for The Poplars."

People's relatives spoke highly about the service provided and felt the service had, "Improved so much." They also spoke positively about the dedication and commitment of the staff and the confidence they had in them. A relative told us, "Staff are really approachable and helpful." There was a positive and open culture at the service and staff felt included in the running of the service. One staff member told us, "There has been a lot of positive change at The Poplars over the past year." They went on to tell us, "The service really has developed and I feel we have all been a part of the change and improvements."

Relatives we spoke with were very complimentary about the changes that had been made at the service. One relative said, "We have had some worries and concerns in the past, but things really have improved." The relative went on to tell us, "We are very satisfied and very pleased." We saw a 'Thank you' card had been sent to the staff at the service, to thank them for the care and support given to their family member.

Staff told us they had regular supervision and appraisal with a member of the management team. One staff

member said, "I am due a supervision and once [new manager] is settled, I am sure I will have a supervision." The staff member went on to say, "I ask for my supervision because it is a really useful process; we (staff) get the opportunity for feedback about our development." Supervision is recognised as a supportive meeting held between a manager and staff member. Staff felt there was good team working and an open and inclusive culture was promoted at the service.