

National Autistic Society (The) Blackdown House

Inspection report

Somerset Court
Harp Road, Brent Knoll
Highbridge
Somerset
TA9 4HQ

Tel: 01278761905
Website: www.nas.org.uk

Date of inspection visit:
28 September 2016

Date of publication:
20 October 2016

Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Requires Improvement 



Summary of findings

Overall summary

Blackdown House is a large detached bungalow situated in the extensive grounds of Somerset Court. The home accommodates up to 12 people who have autism and complex support needs. The home comprises of the main building and two self-contained flats attached to the home. At the time of our inspection there were four people living in the main part of the home and one person living in each of the flats. People living at Blackdown House can access all other facilities on the Somerset Court site which include various day services.

There was no registered manager for this service. 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. An experienced member of the provider's staff was currently managing the home on a temporary basis.

We carried out an unannounced comprehensive inspection of this service on 30 June and 1 and 5 July 2016. A breach of legal requirements was found as some staff were not skilled, experienced or knowledgeable enough to respond to the complex needs of people. Staff did not always feel supported during incidents. At times, there was not a suitable staff skill mix available to keep people safe. Important information relating to people was not easily available for staff and staff were not all aware of the actions they should take to ensure people remained calm, their guidelines and routines.

After the comprehensive inspection, we used our enforcement powers and served a Warning Notice on the provider on 28 July 2016. This was a formal notice which confirmed the provider had to meet one legal requirement by 26 September 2016.

We undertook this focused inspection to check they now met this legal requirement. This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Blackdown House on our website at www.cqc.org.uk

We found action had been taken to improve people's safety.

People were supported by sufficient staff with the right skills and knowledge to meet their individual needs. Support for and communication throughout the staff team had improved. A new, bespoke induction process had been introduced for all new staff. This induction process ensured staff understood the risks to people and their care needs and staffs' confidence in providing support to people when they started working on shift.

Staff knew about risks to people, their routines, personal and health care needs and causes of anxiety. Staff

had a range of documents they could refer to which explained the care and support each person required and how this should be provided. One staff member said "All of our team seem more confident and knowledgeable."

Staff spoken with and records seen confirmed incidents where people had become anxious or upset had reduced. Staff told us people were "Much more settled now; they seem a lot happier." The provider's behaviour coordinator and communication coordinator had also been supporting the service to ensure people's needs were met and to offer ongoing guidance, mentoring and support to staff.

The legal requirement had been met; the provider had therefore complied with our Warning Notice.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve safety.

People were supported by sufficient staff with the right skills and knowledge to meet their individual needs. Staff received ongoing support, supervision and mentoring to ensure they met people's needs.

Staff knew about risks to people, their routines, care needs and causes of anxiety. Staff knew how to support people who became upset, anxious or emotional.

We could not improve the rating for safe from Requires Improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement 

Blackdown House

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.

We undertook this unannounced focused inspection of Blackdown House on 28 September 2016. This inspection was done to check that improvements to meet legal requirements after our comprehensive inspection on 30 June and 1 and 5 July 2016 had been made. We inspected the service against one of the five questions we ask about services: is the service safe. This is because the service was not meeting some legal requirements.

Before the inspection we reviewed the information we held about the service. We looked at the information we had received from the service including their action plan following the last inspection which detailed the improvements they intended to make.

The inspection was undertaken by one adult social care inspector. During our inspection we spoke with the provider's area manager, behaviour coordinator and communication coordinator, the acting manager and three members of staff. We looked at the care records of two people living in the home.

We also looked at records relevant to the running of the service. This included staff training records, staffing rotas, staff meeting minutes and incident and accident reports.

Is the service safe?

Our findings

At the last inspection of this service on 30 June and 1 and 5 July 2016 we found a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations (2014). Some aspects of the service were not safe. This was because staff were not skilled, experienced or knowledgeable enough to respond to the complex needs of people. Staff did not always feel supported. At times there was not a suitable staff skill mix available to keep people safe. Important information relating to people was not easily available for staff and staff were not all aware of the actions they should take to ensure people remains calm, their guidelines and routines.

At this latest inspection we found action had been taken to improve people's safety. A new, bespoke induction process had been introduced for all new staff. In addition to the provider's induction training, new staff now had a minimum of seven 'shadow shifts' in the home where they spent time reading people's care plans and then worked alongside an experienced member of staff and observed their practice. Staff could ask for more shadow shifts or reading time if they needed them to ensure they were confident before working as part of the team. We read that one staff member had asked for an additional shadow shift to again observe one person's care; this had been arranged for them.

There was a mixture of formal and informal support for new staff during their induction. Each new member of staff had a minimum of three supervisions (a one to one meeting with their line manager) where they discussed their progress and any further support they required. Staff could request further additional supervisions if they felt they needed them. One staff member said "The induction was really good. You read the person's care plan then shadowed staff supporting them so you saw the plan in action. All the staff here have been fantastic." This induction process ensured staff understood the risks to people and their care needs and staffs' confidence in providing support to people when they started working on shift.

After staff had successfully completed the induction process they were then able to support four of the people who lived at the home. The other two people had more complex needs and both could become very anxious if they were supported by people they did not know well. New staff had to work in the home for at least three months before they could support either of these people. This allowed time for these two people to become familiar with new staff and start to build a relationship with them. This ensured people were not supported by staff who would cause them anxiety.

Staff knew about people's routines, personal care and health needs and causes of anxiety. There were detailed care plans and risk assessments for each person which staff had read. A concise care plan had also been developed which contained essential information about each person, including their daily routines, how they communicated and how to support them if they became anxious or upset. This ensured staff had a range of documents they could refer to which explained the care and support each person required and how this should be provided. One staff member said "All of our team seem more confident and knowledgeable" and another told us "It's a lot better here now. Everything is a lot more thorough. Much

more focus on the people here."

Staff told us support for and communication throughout the team had improved. All staff now had regular supervision meetings (following their induction). There were regular team meetings and a handover of important information when staff started each shift. Staff meeting minutes showed changes being made in home were discussed and evaluated to ensure people's needs were met and staff were given the right support and training. This had led to more consistent support being provided to people. Staff told us people were "Much more settled now; they seem a lot happier" and "It's actually very settled house now."

Occasionally people became upset, anxious or emotional. Staff spoken with and records seen confirmed incidents where people had become anxious or upset had reduced. Staff told us this reduction was due to the improved induction, support and mentoring for staff and all staff re-reading people's care plans and risk assessments to ensure these were followed consistently. Staff comments included "People's anxieties have definitely reduced; there are less incidents now" and "I'm actually quite surprised how much happier and more settled people have become."

People were supported by sufficient staff with the right skills and knowledge to meet their individual needs. New staff had been recruited since we last inspected; there were currently five vacancies for part time staff. Staff spoken with and staff rotas confirmed these vacant hours were covered by the provider's relief staff (who worked in the home on a casual basis) or by agency staff. The acting manager ensured each shift had experienced staff on duty and that regular relief and agency staff were used. One staff member said "Before, everything was always changing. There's a good team on each shift now. People know the staff on duty now." Another told us "Staffing is much better. There are experienced staff on each shift." This ensured people were supported by staff they knew and understood their needs.

The provider's behaviour coordinator and communication coordinator had also been supporting the service to ensure people's needs were met and to offer ongoing guidance and support to staff. One of these staff members told us "I have been observing staff practice and given them pointers of how best to support the people they work with. This has improved their practice and confidence with the people they support. The staff have come to me for advice and support and have said I have helped them to gain confidence." All staff spoken with said their knowledge and confidence in supporting each person had improved since the last inspection. One staff member said "The extra support has been really helpful. They help you to really understand people and how to interact with them to reduce anxiety."