

# Voyage 1 Limited

# Cedar Road

## Inspection report

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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

Cedar Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. Cedar Road accommodates nine people across one large purpose build building.

This service also provides a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a service to younger disabled adults.

At this inspection we found the service remains Good.

People felt safe and secure around staff they knew and were familiar with. Staff understood how to keep people safe and understood the process for reporting any concerns. The registered manager had developed links with the local authority in order to discuss any concerns they may have and work together to identify any improvements. Staff understood people's health and any underlying risks to their health and wellbeing. Staff knew what action to take to protect people and reduce the risks to their health and wellbeing. The registered manager followed the registered provider's process for ensuring staff working at the service had background recruitment checks in place. People received advice and support with their medicines and checks were carried out by the management team to ensure people received the correct medicines.

People were supported by staff that had access to regular supervision and training which was monitored to ensure it was up to date. People received support from staff that worked with other professionals to ensure their care was based on best practice. People were encouraged to support a healthy lifestyle which included exercise and a diet offering healthy choices. People liked the food and could help plan their meals. 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 were encouraged by staff to develop interests and were supported to plan how their care was delivered. People were involved in regular meetings to review their care and identify goals within their care that they wanted to achieve. Staff met with people to review and plan their care to show how these goals were achieved.

People understood they could complain if needed and knew the process to make a complaint. People felt assured if they spoke with the staff or the registered manager, they would listen and act upon their concerns. People felt comfortable approaching the registered manager and sharing their worries or concerns.

People knew and were familiar with the management team and felt they were accessible to them. The management team worked with staff to review and monitor people's care. Key workers were involved in helping update care plans to reflect changes in care preferences.

The management team worked together to review and monitor people's care through regular care planning meetings, team meeting as well as checks ensured the system for updating people's care was embedded.

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.

<b>Is the service safe?</b> The service remains Good	<b>Good</b> ●
<b>Is the service effective?</b> The service remains Effective.	<b>Good</b> ●
<b>Is the service caring?</b> The service remains Caring.	<b>Good</b> ●
<b>Is the service responsive?</b> The service was Responsive.	<b>Good</b> ●
<b>Is the service well-led?</b> The service was Well Led.	<b>Good</b> ●

# Cedar 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 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 was a comprehensive, unannounced inspection which took place on 5 December 2017. The inspection was undertaken by one inspector.

As part of the inspection we reviewed the information we held about the service and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law. We requested information about the home from the local authority. The local authority has responsibility for funding people who used the service and monitoring its safety and quality.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we spent time with people in the communal areas of the home and saw how staff supported the people they cared for. We spoke with three people who lived at the home. We also spoke with three care staff, the registered manager, a health care professional visiting the service as well as the Registered Manager.

We checked three people's care records. We also checked staff recruitment and training records. We also looked at information which showed us how the provider and registered manager monitored the quality of the care provided and the actions they took to develop the service further. This included questionnaires, minutes of meetings with people living at the home and minutes of staff meetings.

# Is the service safe?

## Our findings

When inspected in September 2016 this section was rated as Good. We found the service continued to be rated as Good at this inspection.

People told us they felt safe living at the home. One person told us about the home in comparison to others they'd lived in, "This is by far the best." Another person told us, "The staff here are brilliant. I definitely feel safe." We observed staff supporting people to mobilise in a safe way. People told us they felt safe within the home and around the staff supporting them. People appeared comfortable and relaxed in the presence of staff.

Staff understood how to keep people safe. Staff could explain to us the different types of abuse and that they felt comfortable they could report issues to the registered manager. The registered manager understood their obligations and how issues needed to be escalated where appropriate. The registered manager told us any issues in connection with potential abuse were also reported to the registered provider for them to monitor in addition to the local authority and CQC.

One person living at the home shared with us how they were preparing to live independently. Staff explained the process for supporting the person to increase their independence and about how at each stage different risks had to be assessed. They told us this included helping the person to do more things unsupported, such as shopping. At each stage the risks to the person were documented and updated based on how the person's journey for independence was progressing.

People's need for support was assessed and monitored regularly. Staff we spoke with understood the risks to people's health that they lived with and how best to manage those risks. Some risks to people's health were around anxiety and how staff could reduce the risk of raising a person's anxiety levels by understanding how the person required support. Staff we spoke with understood how they needed to support people so that harm to them could be minimised. We saw in three care plans that the registered manager had a system in place for reviewing and updating people's care depending on the risks to their health, which were individual to the person.

People told us they received the support they needed in a timely way. We saw people in communal areas sit and spend time with staff and people were happy to sit and chat. Staff also told us they thought staffing levels were adequately matched to people's needs. Staff reported that they did not have any concerns about staffing levels. The registered manager told us they reviewed staffing when a new person joined the service and would seek further staff if this was appropriate.

People told us they received support with their medicines and that they could ask for pain relief whenever they needed. We saw people were relaxed and comfortable when they had their medicines. Staff explained what they were doing and waited patiently for people as they got ready. Staff competency to support people with their medicines was checked regularly by the registered manager. The registered manager together with the deputy manager had a system in place for regularly checking people received their medicines as

they should.

The registered manager told us the home had a lead member of staff that was responsible for managing Infection Control. We saw staff use gloves and aprons when providing care to prevent the spread of infection. The registered manager also told us they made regular checks of the building and staff to ensure the risk of infection spreading was minimised.

Staff told us the registered manager explained to them if things had not gone as expected with people's care and that there were lessons to learn. One staff member told us the registered manager would, "Always explain things properly", such as in a team meeting or in a supervision meeting. Minutes of staff meetings we reviewed confirmed the registered manager used the meetings as reminders to prompt staff about how people's care needed to be delivered.

Accidents and incidents were recorded by staff for the registered manager to refer to. The registered manager had reviewed accidents and incidents to identify any possible trends or if any changes were needed to people's care plans. Staff told us the registered manager was good at sharing learning from events with them, through guidance on how best to do something.

## Is the service effective?

### Our findings

When inspected in September 2016 this section was rated as Good. We found the service continued to be rated as Good at this inspection.

People we spoke with liked the care they received and felt assured staff understood what was needed to support them and how best to support them. We reviewed three care plans which detailed how people should be cared for. The registered manager explained that people's care was reviewed at multi-disciplinary meetings to ensure the professionals involved in the person's care could provide advice based on best practice.

Staff were keen to share with us their positive experience of training. They told us they had access to training and felt able to request training if they needed. Details of upcoming training was shared with staff so that staff had plenty of notice of training in order to attend. Staff told us this made training far more accessible to staff. Staff told us about some of the training they had and how it was relevant to their work. For example, communication skills and manual handling training. One staff member told us they had recently joined the service and had felt their confidence had grown through shadowing experienced staff members and also undergoing training.

People were confident they received the help and support they needed. During the inspection, we saw one person being supported to attend a medical appointment. The person told us they had support to attend appointments or access any other service they needed. Another person told us they received the support they needed to access any other support they needed to maintain their health and wellbeing. This included GP and hospital appointments.

People's weight and nutrition was monitored where this was appropriate. Where there were concerns about people's weight, people were supported to follow an appropriate diet that incorporated choice. For example, one person told us about how they had managed to lose weight and that they offered choices that were low calorie. Another person told us they always enjoyed their meals because they helped shop for the meals and had choice in the meals they ate.

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). We saw that people's right to make decisions for themselves was promoted. People told us they helped care staff make decisions affecting their care. They told us they were involved in planning their care and where appropriate signed the care plans to confirm their agreement. Staff we spoke with could also explain whether any conditions on authorisations to deprive a person of their liberty had been approved and what the conditions were. The registered manager explained their process and how they monitored applications to ensure the necessary paperwork was in place.

One person invited us to speak with them in their bedroom. We saw that the person was surrounded by



items and photographs of their family that were important to them. We also saw that they had collected memorabilia from some of their trips, and this was also put on display in their room. Another person told us they had helped influence how their room was decorated and that it was important to them. People using wheelchairs were able to access different parts of the building unaided and the building design had incorporated wheelchair users.

## Is the service caring?

### Our findings

When inspected in September 2016 this section was rated as Good. We found the service continued to be rated as Good at this inspection.

People told us they liked the staff supporting them. One person described staff as "Great." We saw people exchange light hearted jokes using a variety of communication methods that were appropriate for the person. We saw staff recognise when a person needed reassurance and respond appropriately. For example, we saw staff use technology to communicate, and include the person in their conversations. The person was at the centre of the conversation and staff responded with humour in a manner that the person was comfortable with. Staff demonstrated an understanding of people's wellbeing. We saw staff chat to people. One person liked a particular pop band and we saw staff talk with the person about their preference in music. The person was happy to continue the conversation and share with inspection staff how staff had helped the person meet the band.

People were supported by staff that understood how people needed to express themselves. We saw staff instinctively understand from a person's facial gestures that they needed the staff member's time to talk and staff responded instantly. We saw also staff sit and chat with people and talk about what they were doing and what they had planned for the day and about how they wanted staff to support them. People told us they were supported to take part in meetings about their care. People had Key Workers, who they met with monthly to talk about their care. People told us they could speak with their Key Worker and talk about things that were important to them. Three people we spoke with all told us they liked their Key Worker and felt able and comfortable to discuss their care needs.

We saw people's privacy was respected. Staff understood and respected people's boundaries for discussion and recognised when people chose things they did not want discussed. Staff understood what people required support with and what they chose to undertake independently. We saw one person being supported to make their own drinks while staff were nearby in case the person requested help. People told us staff support for them was appropriate and that staff helped people as little or as much as people wanted. People told us they felt they were encouraged to increase their level of independence and that as time had progressed their levels of independence grew.

## Is the service responsive?

### Our findings

When inspected in September 2016 this section was rated as Good. We found the service continued to be rated as Good at this inspection.

People told us about their care and how important it was to them to do things they enjoyed and pursue their hobbies and interests. One person told us about how singing was important to them and how this helped them because it made them feel good. The person told us that the registered manager had helped them pursue their interest in singing and that this had supported their wellbeing. Another person told us about their desire to be more independent and that they had worked with staff to identify goals and work towards the goals and achieve a more independent life. They told us they did this through regular meetings with staff.

People told us they spoke to their Key Worker and the management team of the home regularly about their care. They told us they had periodic meetings and whomever they chose could attend. One person explained how they liked their Key Worker and they had the opportunity to discuss their care and feedback about the things they liked about their care and the things they did not. One person told us how they had a good relationship with their key worker and this helped them feel at ease when discussing their care.

People we spoke with told us they hadn't complained about anything but felt confident that they could speak with the registered manager if they needed to share their concerns about anything. One person told us about how they had in the past not liked one of the staff members. However they had no hesitation in sharing their thoughts about their care with the current registered manager who they felt would listen and act upon their concerns.

The registered manager explained how complaints and comments were processed. He explained that the home had a complaints process and copies of complaints were shared with the registered provider. The registered manager explained that there had not been any complaints in their time as the registered manager at the service. We saw examples of compliments that had been fed back about the service from relatives and health care professionals which were all positive.

# Is the service well-led?

## Our findings

When inspected in September 2016 this section was rated as Good. We found the service continued to be rated as Good at this inspection.

The registered manager had been in the post and had previously worked within the 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.

People told us they liked the registered manager and the care they received. Staff spoke positively about working at the service. One staff member said, "It's quite homely. It's not like coming into work." Another staff member told us working there was "Really rewarding." One staff member told us the registered manager was, "Lovely and always at the end of a phone."

The registered manager told us about how the management team worked together to manage people's care. The registered manager described a good working relationship with the deputy manager with a clear understanding of each other's roles and responsibilities. Regular management meetings were held in order to discuss and review people's care. Staff told us information from management meetings was shared with them at staff meetings. We reviewed notes of staff meetings and saw that information was shared with staff so that staff could better care for the people they supported. One staff member told us they had a query about someone's care and supporting them if they had a fall. They told us, the registered manager had been really helpful in providing advice and guidance. Staff also explained to us that if they had any queries about people's care, they felt confident one of the management team would help them. Staff told us the management team regularly provided them with updates about changes in people's care.

People we spoke with spoke positively about their experience of receiving care. People told us they felt their views were listened to and that they could share their opinions and thoughts about their care as well as what they thought about how the service was run. The registered manager explained the process they used to ensure people's care met people's needs and expectations as well as ensured it met the registered provider's standards. Regular checks were made of the building, people's care, people's medicines as well as staff performance. The registered manager explained the registered provider also undertook regular checks to ensure people received the right care. The registered manager explained how they regularly reported on any accidents and incidents or staff absences so that any trends or learning could be identified and shared with staff for learning.

The registered manager described how they worked with a number of stakeholders to work together to improve people's experience of care. During the inspection we spoke with a health provider who explained how they worked collaboratively with the registered manager to develop people's care as the person's needs changed. They explained how regular meetings and having clear sense of aims and objectives for the person enabled the person to benefit from their input.

