

Psycare Limited

Greenwood Cottage

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 

Overall summary

We carried out an unannounced inspection on 13 October 2015.

Greenwood Cottage is registered to provide accommodation and personal care for up to six people who may have a learning disability or autistic spectrum disorder. At the time of the inspection, six people were being supported by the service.

The service had a manager, who was registered with the Care Quality Commission. 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's needs had been assessed, and detailed personalised care plans took account of people's individual needs, preferences, and choices. There were risk assessments in place that gave information and guidance to staff on how risks to people could be reduced. There were systems in place to safeguard people from the risk of avoidable harm.

Summary of findings

The provider had effective recruitment processes in place and there were sufficient staff with the skills and experience to support people safely. Staff understood their roles and responsibilities and had clear lines of accountability. Staff obtained people's consent and gave people appropriate choices prior to care being provided.

Staff received support, guidance and supervision, and had received appropriate training, relevant to their roles and responsibilities.

Staff were caring and respectful to the people they supported and to each other. People were supported to pursue their interests and hobbies relevant to their abilities. People were supported to access health services including GP and Hospital appointments when required.

The provider had a procedure for handling concerns, compliments and complaints. They encouraged feedback from people and acted on the comments received to continually improve the quality of the service.

The provider had effective quality monitoring processes in place. All aspects of the service were monitored by a range of audits that were in place. Records were all held securely in locked filing cabinets in the staff office on the first floor.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Staff knew how to recognise and report allegations of abuse.

The recruitment process was effective to ensure that staff who were employed at the service staff were appropriate and qualified to do their jobs.

There were sufficient numbers of staff were available to meet people's individual needs at all times.

People were supported to take their medicines safely by trained staff.

Possible risks to people's health and well-being were identified and managed effectively.

Good



Is the service effective?

The service was effective.

People were asked to give consent before care and or support was provided and consent was constantly reviewed and was recorded.

Mental Capacity Assessments had been completed and where required best interest decisions were recorded in line with MCA requirements.

Staff had been trained to give them the required skills to meet people's needs effectively.

People were provided with a varied and balanced diet which met their needs.

People had their health needs met with access to health professionals when required.

Good



Is the service caring?

The service was caring.

People were cared for in a kind and compassionate way by staff who knew them well and were familiar with their needs.

People were involved in their care planning and review of their care.

People were treated in a way that respected their dignity and privacy.

People and their relatives were able to access independent advocacy services if required.

Good



Is the service responsive?

The service was responsive.

People's care and support was centred on them and met their needs and gave them choices.

Staff had access to information and guidance that enabled them to provide person centred care and support.

People were supported to pursue hobbies and social events, relevant to their needs.

There was a complaints policy in place. People knew how to make a complaint if they needed to.

Good



Summary of findings

Is the service well-led?

The service was well led.

The manager demonstrated an open and transparent work ethic where people were supported to optimise their potential.

There were effective quality monitoring systems in place to manage risks and a range of audits in place to continually improve the standards

People who used the service and staff spoke positively about the management of the service.

Staff had clear roles and responsibilities and were well supported by the management team.

Good



Greenwood Cottage

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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2014 and to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This visit took place on 13 October 2015 and was carried out by one Inspector. The visit was unannounced. Before our inspection we reviewed information we held about the service including statutory notifications relating to the service. Statutory notifications include information about important events which the provider is required to send us.

During and following the inspection we spoke with three people who used the service, two relatives, three members

of care staff and the registered manager. We received feedback from health and social care commissioners. We reviewed people's support plans and risk assessments. We looked at staff recruitment records and staff support documents including team meeting minutes and individual training and supervision records. We reviewed safeguarding records, comments and complaints records. We looked at quality monitoring records and a range of audits, relating to various aspects of the service including medication audits and competency checks fire safety records and the maintenance records. We also reviewed accident and incident records.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.'

Is the service safe?

Our findings

People who used the service told us they felt safe. One person told us, “The staff look after me so well, I have never been afraid, I know I am safe, the staff make sure we are all safe.” Another person said, “I have a keyworker and would speak to them if I had any concerns about anything”. A person said that, “A long time ago I had a problem with someone and I told my keyworker and it was sorted out”. They then said, “I don’t worry about things anymore”. This feedback helped us to assess how safe people felt in the home.

Staff were able to describe the safeguarding process and how to report, record and escalate any concerns they may have relating to the safety and wellbeing of people. Staff had also received training in safeguarding people and demonstrated a good understanding of what to look for and were able to describe different types of abuse.

Staff talked about the provider’s whistleblowing procedure, and how they would initially report concerns internally and would escalate them to other bodies such as the local authority if they were not happy they had been fully addressed. However, staff told us they would report any concerns they had to their manager and they were confident they would be dealt with efficiently and effectively.

Information about safeguarding was displayed in the office and on the notice board in the hall, so provided a visible reminder for people and staff and it had contact telephone numbers.

Care and support was planned and delivered in a way that helped to ensure people’s safety and welfare. There were risk assessments in place including risk assessments for

people going out in the community. This was to help to ensure that any risks that were identified could be minimised or mitigated so that people who used the service and staff were protected.

The manager and staff told us that they encouraged and supported people to take, ‘positive and informed risks’ to enhance their quality of life. One person told us, “I never used to go out on my own, now I go everywhere and I know what bus to get”. Staff told us how the person’s quality of life had improved since being supported with this aspect of their life. The manager told us that people had attended a ‘think safe’ awareness course to help to ensure they were as safe as possible while accessing community events and venues.

People who used the service said that there was enough staff to support people safely. We observed this to be the case during our inspection. We saw that rotas demonstrated sufficient numbers of staff were deployed at all times to ensure people’s continued safety. Staff told us they felt that the staffing levels were good and enabled them to support people safely, saying they, “never had to rush people or cut corners”.

The provider had effective recruitment processes in place and undertook all the relevant pre-employment checks, which included obtaining references which were validated to ensure they were authentic and Disclosure and Barring Service (DBS) checks for all the staff. The provider also demonstrated that staff retention was very good, with evidence that a number of staff had worked for the service for a long time

The provider had a policy and process in place for the safe management of medicines. Medicines were ordered stored and administered safely and unused medicines were disposed of appropriately. Audits were in place to check that medicines were being managed safely and we saw the latest audit confirmed everything to be in order.

Is the service effective?

Our findings

People told us they felt that staff were well trained and knew how to provide good care. Staff were happy with the training they received and were able to describe how they provided effective care that met people's changing needs. One person told us, "Staff that work with me understand my needs, and they know my likes and dislikes." Staff demonstrated that they understood people's needs and abilities and were able to describe people's individual requirements in detail.

The manager and staff told us their induction training enabled them to meet the needs of people they supported. Staff told us the induction included training such as safeguarding, administration of medicines, moving and handling, food hygiene, and fire safety. Staff were also observed to ensure they were competent and worked with more experienced staff until they were confident to work in an unsupervised capacity. Care plans were personalised and gave staff information and guidance to help them be able to meet people's needs in a personalised way. They demonstrated people's involvement and choices about how and when their care was provided.

People were cared for by staff that were well supported. Staff told us they had received supervision on a regular basis and felt supported by the management team. Staff said supervisions provided them with the opportunity to discuss any issues and receive feedback on their performance, review training requirements and discuss any concerns relating to the people who used the service.

CQC are required to monitor compliance the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS) that set out the requirements that ensure, where appropriate if people do not have the capacity to consent to care, treatment or support that,

decisions are made in people's best interests. The manager told us that they and the staff had training in relation to the MCA. No one living at the home was being deprived of their liberty. Staff knew about people's individual abilities to make decisions and understood their responsibilities for supporting people to make decisions. Staff told us they obtained people's consent before they supported them. One person told us, "The girls [staff] always check with me first before they do anything and they do what I ask them to do." The care plans we reviewed had been signed by people to confirm they had consented to the support they received.

Staff told us that people assisted with meal preparation and had tasks they enjoyed doing around the home. One person told us, "I peel the potatoes and the vegetables and I am so quick". We saw that people could help themselves to food and drinks whenever they wanted and staff assisted those who were unable to help themselves. We observed lunch being served and saw that everyone had something different to eat. For example one person said they wanted a boiled egg, another person had soup and someone else had cheese on toast. This demonstrated that people were able to choose their own food and were supported by staff to eat a healthy and nutritious diet. Two people went out to a local pub for lunch. Staff kept records of what people ate and drank to make sure people had consumed adequate to maintain a balanced diet and sufficient fluids, to reduce the risks of dehydration. Any concerns were appropriately referred for specialist dietary advice and support.

People's health care needs were recorded in their care plan. Staff told us they were aware of people's health requirements and supported them to attend medical appointments such as GP's opticians and dental appointments. People were able to access independent advocacy services if required.

Is the service caring?

Our findings

People told us that staff were caring and supportive. One person told us, "They treat me like a king here, I love living here". We observed staff were kind and caring to the people they supported and to each other. Staff worked as a team and all helped and supported each other which created a nice atmosphere that was homely and natural. We observed staff sitting down chatting with people, eating lunch together, laughing and joking together and going out together. We saw that staff were compassionate and cared about including and involving everyone." One person's relative said, "The staff have built up a good rapport and it works really well, I think this a lovely home."

The manager and staff ensured people's rights were protected as people told us they were involved in the development of their care package and involved in reviews of care. Information in records confirmed this as people had signed and dated their care plans to demonstrate their involvement. We saw that people were encouraged to take positive and informed risks and staff encouraged, supported and praised them for achieving what they could. Staff and the manager went the extra mile and demonstrated repeatedly how people were integral to everything they did and if the people were happy, they were happy.

Records showed that people were supported to maintain as much independence as possible. This was confirmed

with people and relatives we spoke with. One person's relative told us; their relative had become more independent with support from staff. We saw that staff always gave people choices and gave them time to think about the options.

People told us that staff supported them to maintain their dignity. One person told us, "The staff are very friendly but also professional they always make sure my dignity is maintained when they support me."

People spoke fondly about their care and support workers and told us they were, "Happy with the way I am cared for." A person told us the most important thing was, "having staff that were consistent to enable people to build trust and a meaningful relationship". People spoke with genuine positivity when telling us about their care workers. Staff were also clearly caring and compassionate when describing people they cared for.

Information was provided to people in a format they could understand and which enabled them to make informed choices and decisions. However staff told us they assisted people and explained things to them which ensured they were always kept informed if anything changed. People had individual keyworkers and details were displayed on their bedroom doors with a simple explanation about the role of the keyworker and how their keyworker could support and assist them.

Is the service responsive?

Our findings

The service was responsive to people's needs. People confirmed that they had been involved in their assessment before they used the service. One person told us, "I was involved in my assessment, so the staff understand how I like to be supported. They know my likes and dislikes." Another person's relative told us, "We are very happy with the care provided and we have been fully involved and get regular updates from the service."

Staff had the relevant information required to support people appropriately. We saw that information had been used from people's live histories and initial assessments to develop their care and support plans. Information in people's care plans was personalised, was clear, well written and concise. People's changing needs were monitored to ensure the care they received was relevant and met their needs. We saw that reviews of care took place regularly and whenever there was a change to the person's needs and or abilities to make sure that people's current needs continued to be met.

The manager sought people's views and preferences to enable them to provide personalised support to people. The manager and staff told us that people were provided with relevant information about the service, what they could expect to receive and in a format that they could understand.

People told us about a range of interests they had and about the places they had visited and planned to visit. We observed people were supported to pursue hobbies and interests. These were personalised and supported people to maximise their potential. For example a person had been supported to go out shopping and into town alone. The person had not previously had the skills or confidence

to do this but had been supported by staff setting small and manageable objectives. The person had been provided with a mobile phone with numbers installed in case they needed help or support. They had been supported to attend a safety awareness course and been helped to become familiar with traveling on buses. The person had a bell on their purse to help reduce the risk of being 'pickpocketed', and they were advised to only take small amounts of money to protect them further. The person told us "I love going on the bus and I bought myself a new item last week, I might treat myself to something else today".

We saw that people had been to local attractions, cinema, restaurants, clubs and on holiday. Two people showed us their 'scrap books' with lots of pictures and description about their adventures. People were planning to go abroad next year and spoke excitedly about their plans. People who lived at Greenwood Cottage lived life to the full and told us, "The staff and manager help us to do everything we want to do".

People told us the staff supported them in their preferred way. Comments from people and their relatives included, "[Person] will tell the staff how they like things doing and they(staff) always check they are happy with everything. The staff are lovely, they do what I ask."

Staff told us that any complaints or concerns made to them would be reported to the manager. One staff member said, "No one has ever complained to me, but if they did I would inform the manager straight away." People told us they had been given a copy of the complaints policy. The manager told us that no complaints had been received since the last inspection. We saw that documentation was in place to record complaints and details on how they had been addressed.

Is the service well-led?

Our findings

The service was well led. The registered manager had an open and transparent approach, and a clear vision for the service. People who used the service knew who the manager was and we observed they approached the manager in a confident and friendly manner. The management team and staffing structure were clearly described and all staff were aware of their roles and responsibilities. People who used the service and their relatives were clear who the manager was and told us that they felt the service was well managed.

The provider's quality assurance system was well developed. We were told about, and shown evidence of, a range of audits and quality assurance systems which demonstrated that the manager and staff wanted to continually improve the standards of care for people who used the service. We saw that people's views had been sought at care reviews and people confirmed they were happy with the support they received. Where people had requested any changes in their care package records showed that action had been taken to address the requests.

The provider conducted regular audits to check that people received good quality care. The management team conducted regular checks of completed medicine records that were returned to the office to make sure that staff had supported people to take their medicines as prescribed.

The provider ensured people were supported according to their identified health and care needs. Care plan reviews and people's level of needs were regularly reviewed and updated to enable the manager to check that the staffing levels were sufficient to support people according to their needs and abilities. Staff told us they were given sufficient

time to enable them to support people in an unhurried way. There was always enough staff so that if a person wanted to go out at short notice they could, it was not reliant on the availability of staff.

The manager was available to support staff outside office hours. We saw that the manager and staff were able to provide cover when needed. Staff told us that if they needed support there was always someone on call to assist them. One relative told us, "Because the manager sometimes provides hands on support, if they were called out of hours, they know people very well and so people would feel comfortable and the manager would know how to support them."

Daily progress notes were completed detailing what sort of day people had had and also any significant events. This system supported effective communication.

Staff had the relevant guidance to enable them to support people in line with the Care Act 2014 Regulations. We saw that policies and procedures were linked to the new fundamental standards. Staff told us they were aware of the policies and the policies were accessible to them.

We saw that people's confidential records were stored securely and could only be accessed by people who had authorisation to access them. Staff records were kept securely and confidentially by the management team.

There was evidence that the provider worked in partnership with people and their relatives, as well as, health and social care professionals so that they could all support the 'whole' person and make their experience of receiving care as seamless as possible. There was a process in place to monitor accidents, and incidents and when necessary to send notifications to CQC to inform us of particular events, or safeguarding concerns identified by staff working at the service. This process ensured that's all aspects of the service were monitored.