

Innovations Wiltshire Limited

Innovations Wiltshire Limited - 20 Stratton Road

Inspection report

20 Stratton Road
Pewsey
Wiltshire
SN9 5DY

Tel: 01672564957

Date of inspection visit:
22 November 2018

Date of publication:
10 January 2019

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

20 Stratton 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.

The home is part of Innovations Wiltshire Limited and is in a residential area in the town of Pewsey. It is registered to provide personal care for up to three people with a learning disability. At the time of the inspection three people were living at the service.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Staff understood their responsibilities to keep people safe. Risk assessments had been carried out and care plans guided staff how to keep people safe. Safe recruitment processes were followed and there was enough staff on duty to meet people's needs. Medicines were managed safely. Incidents and accidents were reported and reviewed.

Staff had been trained to carry out their roles and had regular supervision sessions. People were supported to eat healthily and had access to ongoing healthcare. 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.

There was a friendly, family atmosphere. People told us staff supported them in the way they wanted. We saw and heard positive interactions between people and staff; there was lots of laughing and banter.

Care plans were detailed and person centred. There was a complaints policy in place and people knew how to raise any issues. Regular feedback was sought from people.

There were robust quality assurance processes in place. Staff said they felt well supported and that the provider was a good employer.

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.

Is the service safe? The service remains Safe.	Good ●
Is the service effective? The service remains Effective.	Good ●
Is the service caring? The service remains Caring.	Good ●
Is the service responsive? The service remains Responsive.	Good ●
Is the service well-led? The service remains Well-led.	Good ●

Innovations Wiltshire Limited - 20 Stratton 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 inspection. The inspection took place on 22 November and was unannounced. The inspection was carried out by one inspector.

Before the inspection we reviewed other information we held about the service, including previous inspection reports and notifications sent to us by the provider. Notifications are information about specific important events the service is legally required to send to us. We also looked at information in the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with three people using the service. We also spoke with the home manager, one member of staff and the registered manager. We received feedback from three relatives of people and one health and social care professional. We reviewed three people's care and support records and four staff files. We also looked at records relating to the management of the service such as incident and accident records, meeting minutes, recruitment and training records, policies, audits and complaints.

Is the service safe?

Our findings

The service remained safe.

People told us they felt safe. One person said, "Yes, I'm safe. If I'm worried about anything, I can talk to staff."

Staff were trained to keep people safe from avoidable abuse and knew how to report any concerns. One member of staff said, "I know what to report and how to do it." Staff were also familiar with the term whistleblowing. One staff member said, "I'm happy to report concerns about poor care and to keep going higher if it wasn't dealt with."

Risk assessments were in place for areas such as kitchen safety, medicines management and the use of cleaning products. These focussed on maximising people's independence whilst also keeping them safe. For example, one person told us staff helped them with budget planning each week to help them not spend too much money.

Safe recruitment procedures were followed. These included inviting potential staff for a formal interview and carrying out pre-employment checks. Within these checks the provider asked for a full employment history, references from previous employers, proof of staff's identity and a satisfactory Disclosure and Barring Service clearance (DBS). The DBS helps employers to make safer recruitment decisions by providing information about a person's criminal record and whether they are barred from working with adults. The registered manager told us that two people had been involved in staff interviews. They said, "[People's names] have been involved. They asked a couple of questions and did really well."

There was enough staff on duty to meet people's needs. There was a small staff team in place to support people. One member of staff said, "This is lone working, because it's usually only one of us [staff] on duty. But I don't mind that." The registered manager said new staff were being recruited. They told us, "I'm just in the process of orientating staff and inducting them to make sure we have a good skill mix across services." The provider was in the process of implementing an electronic staff rota system which they said would improve how the manager could view and amend staffing levels.

Medicines were managed safely. People had been assessed to self-administer their medicines and kept a week's supply of them in locked cupboards in their bedrooms. One person told us, "My tablets are in a cupboard in my room. I do it all myself. I count the meds, show them to staff, then take them." Another person said, "I never used to do it [self-administer], but I do now." One person had a plan in place which detailed how they set their alarm each day to remind them when their medicines were due. Another person went to the local pharmacy each week to collect their medicines.

The environment was clean. People were supported by staff to keep their bedrooms clean and some people were supported to do their own laundry. One person said, "I keep my own room clean. I mop the kitchen floor and do all my own washing. I don't bother with ironing." Another person said, "The staff support me to

clean my room. I strip the bed, staff help me with the washing machine, but I can manage the dryer on my own." Monthly environment audits were carried out and there was an action plan in place for improvements, such as replacing the kitchen flooring and the lounge carpet.

Incidents and accidents were reported. Records showed these had been discussed and shared with staff to avoid recurrence.

The premises were well maintained and safe. Safety reviews and regular servicing of utilities such as electrical checks, regular fire alarm testing and drills were carried out.

Is the service effective?

Our findings

The service remained effective.

People's needs and choices were assessed and regularly reviewed.

Staff were trained to carry out their roles. Records showed the registered manager monitored which training staff had completed and when refresher training was due. Staff said they felt trained and competent. One member of staff said, "My last training was positive behaviour support; learning about breakaway techniques, personal space and positioning etc. It was very interesting."

Staff had regular supervision sessions with their line manager. This meant there was an opportunity for staff to discuss their performance, their training needs and access support in their roles. Regular staff meetings took place and annual appraisals were also undertaken.

People using the service were supported to shop for their own food and to plan their menus. People's care plans detailed their food and drink preferences. One person said, "I cook nearly every night. I really enjoy it. We plan the menu for the week, we all choose two meals we'd like to have and then do a big shop." Another person said, "I'm not very good at cooking but I do tidy the kitchen. We choose what we want to eat. There's a menu on the wall. I don't always want what's on the menu, so then I have something from the freezer." One person told us they were trying to lose weight and staff had supported them to eat healthily. They said, "I have to have [specific diet] and staff help me try to stick to it." We saw people helped themselves to drinks throughout the day. One staff member said, "We take it in turns to make tea and coffee. People have their own jobs in the kitchen. [Person's name] doesn't like cooking so [they] load and empty the dishwasher and put the bins out." One person's relative said, "[Person's name] attended a week-long cooking course at college. As [they] have taken an interest in cooking [their] social worker is currently looking for some part time work on the catering side for [them]."

People had access to ongoing healthcare. Hospital Passports and Health Action Plans were in place. These are documents that state what is needed for a person to remain healthy, including the support which a person may require if they need to go to hospital. When needed, staff supported people to make appointments such as going to see the GP, or dentist. One person said, "If I'm ill, the staff will help. They ask if you want a drink or if they can get you anything. I do go and see the doctor. The staff book the appointments for me and put it in my diary." People's relatives told us staff kept them informed when people were unwell.

Staff remained knowledgeable about the principles of the Mental Capacity Act. People were informed who we were on arrival and were asked if they wanted to speak with us. One member of staff said, "The guys here want to live an independent life. If they wanted to do something risky, we'd risk assess it first, but they've all got capacity to make their own decisions." The registered manager told us they were discussing an independent advocate with one person to help them make more complex decisions.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS). None of the people at the service were subject to DoLS.

Is the service caring?

Our findings

The service remained caring.

One person said, "The staff are very good. They make me laugh." Another person said, "The staff are brilliant. They help me out with things I can't do. They help me when I need it."

The atmosphere was relaxed, friendly and informal. There was lots of laughter and joking between people and staff. For example, we were speaking with one person when a member of staff walked by. The person held their mug out and waved it at the member of staff to indicate they wanted a drink. The member of staff laughed and said, "It's your turn to make it." The person laughed back and said, "I'll make the next one."

When we arrived a member of staff introduced us to people and then explained who we were and why we were there. They said, "It's in the folder I gave you to read, remember?" They went and got the folder and we saw there was easy read information for people on what to expect during an inspection.

One member of staff said, "The clients here are a great bunch of people. They like to be known as 'the guys at number 20'." Another member of staff said, "I enjoy having a good chat with the people here. They're cheeky and like a bit of banter."

One person's relative said, "The staff are very caring. [Person's name] has never complained once about being mis-treated and speaks well of them. They will always assist [person's name] in day to day activities."

Staff respected people's privacy and dignity. People told us they had a front door key and keys to their bedrooms. One person said, "Staff do respect my privacy. They know it's my bedroom." Another person told us, "Staff respect my privacy. I like to lie in and they leave me to it. I've got my own key to my bedroom and the front door. It's good here. You've got your own freedom. Nobody annoys you."

People showed us around the premises. They said it was decorated the way they liked it. There were photographs of people on the wall showing people celebrating birthdays. One person said, "That's a picture of me doing the gardening. I like to grow vegetables."

People's feedback was sought. Regular 'house meetings' took place. One person said, "Yes, we had one [house meeting] the other day. We can say whatever we want." Monthly surveys were undertaken with people. We looked at the latest survey results and saw that no issues had been raised by people.

Is the service responsive?

Our findings

The service remained responsive.

Care plans were person centred and included details of people's likes and dislikes as well as their future goals. Records showed that people were involved in care planning reviews and when people's needs changed plans were amended to reflect this.

Some people had pen portraits in place, others didn't, dependent on their choice. People's daily routines were documented. For example, one person preferred to get up late each day. In another person's plan it was written they woke early and liked to walk to the shop to buy a newspaper after having a shower.

There was a clear focus on maximising people's independence. For example, in one person's plan it was documented that they accessed the local community without staff support. Staff had written, "Doesn't need support in community. Can use the bus and the train. In terms of new places, needs staff support until [they] are familiar with the area." This was confirmed when we spoke with the person and staff. A member of staff said, "One person's family had moved and it meant [person's name] needed to catch trains in and out of [city]. I went with them on the first trip. I did a pictorial guide for where to get the train, which direction to go when we got off etc. [They] didn't really need it but it helped to lessen [their] anxiety." The same member of staff told us they were taking the person to visit their family again soon, but that the person would 'lead'. They said, "We might go the wrong way or miss a train, but it's good to learn by mistakes; it's how we all learn." Another person told us they had also maintained regular family contact with staff support. They said, "Two staff used to come with me, then one and now I go on my own."

Plans for people's mental health needs were detailed. For example, one person told us, "Stress is my main thing. Staff help me with that." They showed us how staff used a problem-solving tool with them to work through things that were worrying them. The registered manager said, "It's nice to see people happy and getting on. They all will achieve their goals. My vision is to see [person's name] move into [their] own place. And [person's name too]. We want to support people to do what they want." One person told us they were actively looking for a job.

People had a wide and varied social life. For example, one person told us they enjoyed watching football and going to the pub. They said, "I go out to the pub, play darts and pool. I love a bit of gossip and I've got friends there." Another person said, "I do quite a bit. I do line dancing and I've been out a lot with them [line dancing group]. I'm going to see my family later." One person had a personal trainer visiting during our inspection. One person's relative told us, "[Person's name] has been in various care homes and never had holidays. However, over the last couple of years Innovations have managed to take [them] on an escorted two-day trip to London to see the sights and this year a five-day cycling trip around the Isle of Wight. A member of staff was happy to give up their time to do this."

Staff we spoke with demonstrated a good understanding of people's support needs. When we asked, people confirmed staff knew them well. One person's relative said, "The majority of staff know [person's name]

really well, have given much support over the years and have a good knowledge of [their] daily needs." However, another person's relative said, "I have become rather frustrated over the past year or more that not enough efforts are now in place. I sense the only thing Innovations do is to 'babysit' my [relative] and keep [them] safe." They told us they had discussed their concerns with the registered manager. A health professional told us they were due to meet with the service in the near future to discuss the person in question. After the inspection, we received feedback from the professional that the service was doing everything they could to promote and maximise the person's independence within the set up at 20 Stratton Road.

There was a complaints procedure in place which was also available in easy read format. People told us they knew how to complain. One person said, "Complain? - I can moan sometimes. If I have any problems with staff I just go upstairs to my room for a bit." No complaints had been received.

Advanced plans were not in place. Having this information in place enables people and their families to inform staff of any special wishes around how they want to be cared for at the end of their lives. This includes information such as whether people wish to be admitted to hospital and if they have any spiritual preferences. The registered manager told us they were in the process of considering how to begin having these conversations with people, whilst recognising it was a sensitive subject.

Is the service well-led?

Our findings

The service remained well-led.

There was a registered manager 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 provider's values were embedded in the service. One member of staff said, "I support people to live as independently as possible in their own home. We try hard to make people independent and achieve what they want to." The registered manager said, "The staff have worked hard with people and have achieved good things. We work with people to help them be prepared for the next step."

Quality assurance processes were in place. Regular audits were carried out on areas such as medicines, infection control, care plans and the environment.

People and their families were engaged and involved in the service. Regular feedback was sought from people. One person's relative said, "The house is well managed by [home manager] and the registered manager. [Person's name] has been in many care homes in the past, not all good and [they] became restless. However, since moving to 20 Stratton Road [their] condition has stabilised and they've started to take an interest in things." However, another person's relative said, "Over recent months I feel they [manager's] are either distracted or too stretched."

Staff said communication within the service and from the provider was "really good." Regular staff meetings took place and staff said they were encouraged to speak up during these. One member of staff said, "We often have little meetings. People and staff can bring things up and they can be addressed quickly because we're such a small group here." We saw minutes of the meetings which showed they were used to share information with the staff team. Another member of staff said, "Innovations are a good employer. They're always helpful and supportive of the staff."

The service had good links with the local community. The registered manager said, "One person has joined the local line dancing group. They have a great time and as a result they get invited to other things, like a trip to London." A new leisure centre was being built to the rear of the property and the registered manager told us one person had taken photographs of every step of the building process. They said, "We're going to make a folder with all the pictures in and present it to the sports centre when it opens. We're thinking of inviting the local paper along." They said people also helped out with the lighting for the local carnival.