

The Oaklea Trust Walby Hill (Adult Care Home)

Inspection Report

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Overall summary

Walby Hill is a converted house in the village of Rothbury for people with learning disabilities. Care and support is provided for up to six people. At the time of our inspection five people were living at the service.

During the inspection we worked with the registered manager who had been in post, managing the service, since December 2010.

Everyone we observed was relaxed and comfortable at Walby Hill. We saw that staff regularly engaged with people using the service and had a good rapport with everyone.

We saw that people were involved in making decisions about all areas of their care. We saw that people's individual care files included appropriate risk assessments and care documentation. We noted that the service had documentation to support 'positive risk taking'.

We noted that the community played a large role in the lives of people using the service. People went on trips

with the over 60s group, they got the regular bus to Alnwick, visited the local café regularly and participated in a local activity centre. During our time at the home people were keen to tell us about all the activities they were involved in and the home displayed in communal areas a large number of items, such as sewing and pictures, that had been made by people using the service.

The staffing structure at Walby Hill was flexible and we saw that although a regular rota was in place for staff consistency, the numbers of staff on duty depended upon the activities and plans of the individuals using the service. We saw that where people were assisted by a staff member on visits out into the community they could pick which staff member went with them.

We saw that service had a strong management presence and this led to a positive culture. We were confident that all staff members were aware of their roles and responsibilities.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

We looked at the staff rota and saw that there were enough staff on duty to make sure that people were cared for safely. The location had a flexible working arrangement in place for staff, which meant if people using the service wanted to plan activities that required staff support then this could be arranged. We saw one person using the service had a copy of the staff rota in her bedroom, she looked at each morning to decide who she would go the local village with that day for a coffee.

We found that the premises were clean and tidy and free of any unpleasant smells.

Where the risk had been identified that people might display behaviour which challenged others, there was clear guidance to help staff to deal with any incidents effectively. We saw that staff worked flexibily and the focus was always on the people who used the service and their health and well-being. Throughout the inspection we saw that staff supported people to make decisions, they guided them and assisted them where necessary but made sure that the overall decision was theirs.

The registered manager and staff working at the home had a good understanding of the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS). Staff had received regular training in safeguarding and staff could clearly and confidently explain what they would do if they suspected any form of abuse.

Are services effective?

People had their needs assessed and staff clearly understood what people's care needs were. We saw that people were regularly involved in decisions, both on a daily basis, but also in terms of short term and long term goal planning. Each person at the home had a document called 'My Life, My Choices', we saw that staff sat down regularly with people and completed the document and discussed and documented any goals they had.

We saw that everyone using the service was involved in planning the weekly food menu, which included discussions around nutrition and food ideas. One staff member told us that the home had recipe books and picture cards and each Sunday everyone sat down together to think of ideas for meals for the next week. We noted that where people were at risk of malnutrition expert advice had been sought and appropriate arrangements had been put in place. We

looked at the weekly menu and saw that where expert advice had been given, adaptions had been made to peoples meals so that the advice was used but they weren't having different meals to others within the home, unless they requested it.

When speaking to people who used the service we noted that the food shop was a big event that everyone liked to be involved in. The registered manager told us that it was a big team effort and that they always ensured that everyone who wanted to go on the food shop was able to go along and help out.

Are services caring?

We observed the relationship between staff and people using the service during our visit and found staff to be attentive towards people's needs. Staff could describe how they were aware of people's needs and people appeared relaxed and comfortable with all staff members and the care provided.

Two people using the service had been to visit a local day centre for the morning. On their return they were keen to show us what they had been making. They told us they went regularly and enjoyed their time there. One person told us that while they, they took part in raffles, made various items in crafts and had their lunch.

During our visit three people using the service showed us around their bedrooms. We saw that all the bedrooms were individually personalised and people were keen to show us around. People told us that they had selected all of the items in their rooms, some they had bought from shops whilst other items they had made in the homes craft classes.

We saw that people were encouraged to share their views about the service in general but also about the personal care they received.

Are services responsive to people's needs?

We saw that people were offered a wide range of activities, both as part of the community and individually. We saw that if someone wanted to do something specific, for example, go on holiday, go bowling or to the cinema that this could be arranged and staff would support people to plan their activities.

One person who lived at the home showed us the activity calendar they had in their bedroom. This showed what activities they planned to do for the next week. Staff told us that the person liked to do lots of different things so a staff member supported them each week to plan out what they wanted to do. We noted that the calendar was up to date and reflected the activities the person told us they had planned for the week ahead.

We saw records as to how people were supported to express their views. We saw that each individual had a personalised care plan and our observations showed that staff followed these and were knowledgeable about peoples individual requirements. The registered manager told us that residents meetings took place every other month, these were called "Natter Chatter Meetings". We saw from the minutes that everyone who lived at the home normally attended and topics varied between people's birthdays, individuals sharing the goals they'd planned and any compliments or complaints about the home in general.

Are services well-led?

The service had a registered manager in post. We saw that the management arrangements provided strong leadership and positive culture. Staff were clear about their roles and responsibilities and appeared happy in their place of work. We noted that there was a positive atmosphere in the home and that everyone using the service was positive in relation to the home and the staff.

We saw that the service worked flexibily with it's staffing structure to support the people who used the service. The registered manager told us that they prioritised the rota based upon the people who used the service and they made sure that it was flexible so people could be as independent as they wanted.

The service had not received any complaints within the last 12 months but staff and the registered manager told us they would know what to do if they did. People using the service had access to the complaints policy, should it be required.

What people who use the service and those that matter to them say

We spoke with all five people who used the service. Due to the complex needs of people using the service we were not always able to verbally seek people's views on the care and support they received, however we could discuss with them what they liked to do and what they had done recently.

One person told us, following a conversation with a staff member, "I like X, she's my friend."

Another person said, "I go to the activity centre a lot, I like doing things, I made these at the craft class."

When asked about the weekly menu, one person said, "We do the menu on a Sunday, we all get to pick meals, I picked todays, I'm going to help serve it, it's my day to help."



Walby Hill (Adult Care Home)

Detailed findings

Background to this inspection

We visited the home on 1 April 2014. Our inspection team was made up of an inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Prior to this visit the service was last inspected by the Care Quality Commission in December 2013 and at the time was meeting all national standards covered during the 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 regulations associated with the Health and Social Care Act 2008 and to pilot a new inspection process under Wave 1.

We spent time observing care in the lounge and dining area and used the Short Observational Framework (SOFI), which is a specific way of observing care to help us understand the experience of people who could talk with us. We looked at all areas of the building, including people's bedrooms (with their permission), the kitchen, bathrooms and communal areas. Throughout the inspection we observed how staff supported and interacted with people who used the service. We saw staff were friendly and supportive at all times. We also spent time looking at records, which included people's care records, and records relating to the management of the home.

Before our inspection, we reviewed all the information we held about the home and contacted the local safeguarding authority and infection prevention and control team. They gave positive feedback about the service.

Care and support is provided for up to six people. On the day of our inspection five people were living at Walby Hill (Adult Care Home), We spoke with four people, four members of care staff and the registered manager. Due to the complex needs of people using the service we were not always able to verbally seek people's views on the care and support they received, however we could discuss with them what they liked to do and what they had done recently.

Are services safe?

Our findings

We saw that when people were talking to staff members, the staff engaged and listened attentively to what people were saying. Throughout the inspection we saw that staff supported people to make decisions, they guided them and assisted them where necessary but made sure that the overall decision was theirs.

Staff told us they had received updated safeguarding training and records confirmed this. We asked two staff members what they would do if they suspected abuse was taking place. Both staff members were confident in their answer and were able to tell us the correct action to take.

We saw that staff were knowledgeable in relation to dealing with people with challenging behaviour. One staff member explained to us the triggers they looked out for in different people within the home. We saw that this information was also recorded in the individuals care plan and was regularly updated to show any changes in behaviour. The registered manager explained to us that they had identified that during meal times one person targeted another person. We saw that the two individuals were strategically placed apart at the dining table and that the staff members sat down and ate at the table also. We saw that meal time was a relaxed occasion with staff and people using the service all taking part in serving and clearing up. We noted that everyone chatted during the meal about activities planned and the home in general, we saw that people using the service and staff members were all involved in the conversations. We concluded that due to the forward planning of staff members the meal time experience was a very relaxed and safe time for all involved.

We looked at the staff rotas for the four weeks before our visit. These showed that a minimum of three staff were always on duty during the day. The registered manager talked to us about how she tried to ensure that the rotas were flexible so that they could support people using the service. She explained how if a person wanted to go out, but required staff support to do so, that the rota was flexible so that this could be facilitated.

We saw that a number of people using the service had activities planned months in advance; including holidays, bus trips and bowling. All activities had been scheduled and the rota was produced around this to ensure sufficient

staff were always available. We concluded that the flexibility in the staffing structure meant that people were supported to take part in community activities but that the risks of doing so were being managed appropriately.

We saw that where people's needs changed staff completed appropriate risk assessments and changed how they supported people. For example, one person had previously been independent and went out in the community alone, however following a number of incidents it was identified that this was no longer safe. To ensure the person remained independent the service had discussed with the person that a staff member would assist her on the outings. The service had provided the person with a copy of the staff rota in advance, so she could pick which staff member she wished to join her each day. This allowed the person to be protected from the risks associated with going out in the community but also the freedom to choose who accompanied them on what activities.

We found that the premises were clean and tidy and free of any unpleasant smells. We spoke with the staff who were knowledgeable about infection control and we saw that where required staff wore suitable personal protective equipment, such as aprons and gloves.

We noted on the day of our inspection that the communal bathrooms were not stocked with paper towels. The registered manager advised they had previously had to remove the paper towels due the behaviour this had caused with one person using the service. She advised they were currently working on this with the local infection prevention and control team to consider other options available. In the mean time we saw that every person using the service had their own towels to limit cross infection. The home had made available spare towels in communal areas for visitors to the service.

The registered manager had a good understanding of the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS). There were no DoLS currently in place, however the registered manager knew the correct procedures to follow to ensure people's rights were protected. Where people did not have capacity to make complex decisions, the registered manager was able to explain the process she would follow in ensuring best interest meetings were held involving advocates and other

Are services safe?

health and social care professionals. During our inspection we spoke to staff about DoLS. All staff members said they understand the importance of DoLS and had received appropriate training.

Are services effective?

(for example, treatment is effective)

Our findings

We saw that everyone using the service had a 'My Life, My Choices' document. This was a tool used by the service to support people towards being independent. It included information about the person, what was required for them to stay safe and a final section where people could record their goals and outcomes. We saw that the 'My Life, My Choices' document was used regularly by staff and people using the service. Staff sat down regularly with people using the service and discussed with them what goals they had, both short term and long term. We saw that when these goals were set people got a chance to say when they would like to achieve them by. For example, one person wanted to go on a day trip to Edinburgh. They had set the goal in March 2014 and said that they would like to achieve it by the end of May 2014.

One staff member told us that each person using the service had a key worker and that the key workers helped to plan and book activities for people. She explained that this didn't mean they had to go with them but that the person might pick another staff member to go with them because they had similar interests or they also liked that activity. She said it all depended upon what the person wanted.

During our observations, we saw that staff members communicated effectively with everyone who used the service. For example, we saw one person who due to complex needs was not always able to communicate clearly. We saw that staff members understood this person and gave time for the person to communicate their decisions and preferences. We noted that if there was too many options available the staff member would narrow it down and then get the person to specify a preference.

We saw that the service had an advocacy policy and tried where possible to engage with the local community to recruit voluntary advocates so that people could have an advocate close by if required.

We talked to the registered manager about how the weekly menu was created. She explained that once a week all the people using the service got together and wrote the weekly menu. Each person got to pick the meals for one day of the week. She explained that if the option wasn't particularly nutritious then the staff would add a side salad or vegetables. Staff told us that if people didn't like the meal selected then an alternative would be selected for them. For example, one staff member said, "This Friday is fish pie, x didn't want fish pie so they decided to have fish like everyone else but as a fish portion instead."

People who used the service told us that they took it in turns to go and help do the food shop on a Monday. We noted people were excited to tell us about the weekly food shop and how everyone got involved. Staff told us how they used recipe books and picture cards to help people think of new ideas. The registered manager told us that the weekly food shop was a big event, all the residents who wanted to go went along with the staff and helped get the food for the week. She explained it was a big team effort.

We observed that meals were home cooked and freshly prepared. We saw that during meal time people commented on how much they had enjoyed their meals.

We saw one person at the home required some additional support regarding their diet and external professional advice had been sought. A care plan had been created to record the needs of the individual. This included the need for a nutritious diet, fortified with extra calories. We saw that whilst this person did not participate in a number of activities staff used this opportunity to provide them with additional snacks, such as fresh Victoria sandwich cake.

Are services caring?

Our findings

We observed staff and people using the service during our visit. We spent time in the communal areas and observed staff interactions with people who used the service. We saw staff attentive towards people; they ensured that they made time for people whenever required and took the time to explain things to people so they didn't feel rushed. We saw one person was still eating their lunch whilst everyone else had returned to the living room. We saw staff regularly reassure the person to take their time and that there was no hurry. We saw that the person continued to eat and finished their meal with the staffs reassurance.

Two people using the service had been to a day centre for the morning. On return they were eager to show all of the staff what they had made that morning. Staff showed a genuine interest in what they had been doing and asked both people individually whether they had enjoyed their morning and what they had been doing. It was evident that people knew the names of all the staff members and there was a rapport throughout the home.

We saw staff knocked on people's doors before entering rooms. Staff ensured any personal care was discussed discretely with people and carried out in private. For example, one person had soiled her top slightly so a staff member immediately offered to go and help her change.

Due to the person's frailty we saw the staff member discretly ask if the person wanted to go to the toilet whilst she was changing her top, so that she didn't need to make the journey twice.

During our visit we had a look around all areas of the home. Staff asked people for permission for us to view their rooms and asked if they would like to show us. Three people using the service had keys to their bedroom so they could lock the room whilst they were out. All residents were very keen to show us their rooms. We saw that each room was decorated as per the individuals preference and personalised. People showed us items they had purchased for their bedrooms, as well as items they had made during craft classes at the home.

Staff were able to describe to us people's needs and preferences in a clear and concise way. We saw that individuals needs were documented clearly in care records and staff were knowledgeable about this.

Everyone in the home appeared to be relaxed and comfortable with the care provided and the support they received from the staff. We saw staff interacted with people at each opportunity. For example, greeting each person as they entered the communal areas. One person within the home liked to repeat the same sentence or conversation regularly throughout the day. We saw that staff always replied cheerfully and appropriately to the person. This appeared to make the person happy as she said, "I like X (staff member), she's my friend".

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

People were offered a wide range of choices regarding social activities whilst living at Walby Hill. We noted that people were encouraged to plan short term and long term goals. For example, one person had planned a seaside holiday in June, whilst another person was planning a trip to Scotland. We saw that when holidays were being planned people were involved in all decisions, they decided where they wanted to go, when and what they wanted to do whilst they were. We saw that where possible staff also got to pick the staff member that went with them.

We spoke to the registered manager who said that they allowed the people using the service to choose who went with them in the majority of circumstances. She told us that people rarely picked the same person, they picked people due to shared interests or conversations they had had with them over time. Whilst viewing people's bedrooms we saw that one person had a copy of the staff monthly rota on her bedroom wall. Staff told us that the person liked to go out to a local café daily for a cup of tea. The person had the rota so she could select each day which staff member went out with her.

Whilst visiting people's bedrooms, another person was keen to show us their activity calendar. This was a pictorial view of the week and what they were going to do. We saw that this information was up to date and the individual was keen to share this information with us.

We saw that a lot of activities available to people involved going out in the community and encouraging independence and social activities. We noted that in addition the home ensured that it arranged regular activities in house for those that either didn't want to go out or who were too frail to do so regularly. We saw that the home had a weekly craft afternoon which was hosted by an external visitor. During our visit people were keen to tell us

that it was craft day and all seemed to be looking forward to this activity. One person who lived at the home did not like to participate in the craft activity so they had arranged to go out with a staff member instead.

We saw that each person at the home had a 'My Life, My Choices' document. The registered manager told us that this was a tool used by the service to support people to be independent, but also to encourage person centred planning. We saw that people had been involved in completing the document initially and regular meetings were held with the person and any representatives to update the document and set any new goals.

Care plan documentation varied in detail depending upon peoples care needs. For example, one person had input from an Occupational Therapist and Physiotherapist due to their mobility needs. We saw that where this individual had adaptions made to support them, for example a raised bed and bed rails, appropriate documentation was completed so all staff members knew how to care for the person without causing any risk of injury.

The registered manager told us that regular residents meetings took place, these were called "Natter Chatter Meetings". These took place every other month. We saw from minutes that these had a regular agenda, including items such as people's birthdays, goals for the months and any compliments and complaints. From the minutes we saw that the meetings were well attended from people using the service and everyone was encouraged to get involved and say their views.

Staff told us as part of the regular meetings with people, both individual and as groups, they discussed any concerns, compliments or complaints. The service had not received any complaints in the last years, however staff talked us through what they would do if an individual wanted to raise a formal complaint.

Are services well-led?

Our findings

Observations of how the registered manager interacted with staff members and comments from staff showed us that the service had a positive culture. Our discussions with people who lived in the home and staff and our observations during the visit showed there was an open culture, which was focused around the people who use the service.

People using the service were offered to complete a yearly satisfaction survey that was arranged by the provider nationally. In addition we saw that the provider had a Customer Involvement Club that people using the service could take part in and share their views of the service. In addition we saw that at the service every over month a residents meeting was held, called 'Natter Chatter', whereby everyone using the service could share their views. We saw that the agenda had a regular item for compliments and complaints and that people were encouraged to share their views.

The registered manager showed us the staff rotas and explained how staff were allocated on each shift. They said staffing levels were kept under review and adjusted according to the dependency levels of people who lived in the home. We saw that the home had a regular staffing team who worked flexibily around the people who used the service. The registered manager told us that they encouraged people to plan in any large activities that they wanted the service to accommodate, such as holiday or day trips and they tried to work the staffing numbers around this.

The registered manager told us that they had 12 permanent staff members and two bank staff and that all rotas were completed four weeks in advance. They advised that they planned as much as they could but they were happy to make changes when they were needed. They said when required staff worked later or started earlier to support the people using the service.

We saw that the rota was not standard, in that the same staffing numbers were not applied to each shift. We saw that the activities people using the service had planned was written on the rota and extra staff were scheduled when needed. For example, we saw that extra staff worked on a Monday afternoon. The registered manager told us that this was when the home did it's weekly food shop and more residents wanted to get involved and go along so they put extra staff on to support this.

Staff were able to clearly tell us about their roles and responsibilities as well as the organisational structure and who they would go to for support if needed.

The service had not received any formal complaints in the past year, however staff could clearly tell us how they would support people in doing so if it was required.

The registered manager showed us records of internal monthly quality audits she completed. These included checks such as infection control, staff training records and whether care plans were complete and if the content had been reviewed.