

Autism Together

Weatherstones Court

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

This announced inspection of Weatherstones Court took place on 4 & 5 October 2017.

Weatherstones Court is a supported housing and domiciliary care service. It is a service provided by Autism Together to support and provide personal care to people who have Autism. This support was provided to people who had various level of support needs within their own apartments which were rented from a private landlord. At the time of our inspection 15 people were receiving support in their own apartments.

At the last inspection in May 2015, the service was rated 'Good'. We found during this inspection that the service remained 'Good.'

People we spoke with and their relatives told us they liked the staff. There were some points raised about staff consistency as many of the staff had left in the last 12 months, mostly due to internal promotion. The service was relying on the use of regular agency staff, however some relatives felt this had a negative impact on their family member. We did see however, continuous consultation with the families and extensive effort to ensure recruitment was on-going. We saw there was a plan in place to address these concerns and the service was actively following a recruitment processes which was updated and reviewed every month.

There was a manager in post who was registered with The Care Quality Commission (CQC). Risks were well assessed and information was updated as and when required. Staff were able to describe the course of action they would take if they felt anyone was at risk of harm or abuse this included 'whistleblowing' to external organisations. Safeguarding concerns, outcomes and investigations were clearly documented, including any additional learning the provider had taken from the concern to prevent re-occurrence. The registered manager had systems and processes in place to ensure that staff who worked at the service were recruited safely. People were supported to manage their medication safely by staff who were trained to do so.

All newly appointed staff were enrolled onto the organisations induction process which was closely aligned to the principles of the Care Certificate. Supervisions were in date, and there was only a small number that were overdue. Training was classroom based, and was mixed with hands on experience over a two week period.

The service was working in accordance with the Mental Capacity Act 2005 (MCA) and associated principles. Where people could consent to decisions regarding their care and support this had been well documented, and where people lacked capacity, the appropriate best interest processes had been followed. The registered manager had approached the Court of Protection (CoP) to lawfully deprive someone of their liberty.

People we spoke with were complimentary about the staff and the service in general. People told us they liked the people who supported them. Staff were able to give us examples of how they preserved dignity and

privacy when providing personal care.

Care plans contained information about people's likes, dislikes, preferences, routines and personalities. Staff we spoke with demonstrated that they knew the people they supported well, and enjoyed the relationships they had built with people. Some staff had started working at the service via the agency and had then applied to become full time members of staff.

Complaints were well managed and documented in accordance with the provider's complaints policy. The complaints policy contained contact details for the local authorities and commissioning groups.

Quality assurance systems were effective and measured service provision. Regular audits were taking place for different aspects of service delivery. Regular action plans were drawn up when areas of improvement were identified. Staff meetings took place on a regular basis, and there was a process across the organisation to gather feedback, however we saw there had been a poor response to this.

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?

Service remains Good

Good ●

Is the service effective?

Service remains Good.

Good ●

Is the service caring?

Service remains Good

Good ●

Is the service responsive?

Service remains Good

Good ●

Is the service well-led?

Service remains Good

Good ●

Weatherstones Court

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 checked 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 inspection was a comprehensive inspection.

This inspection took place on 4 & 5 October 2017.

The provider was given 48 hours' notice because the location provides a domiciliary care service; we needed to be sure that staff and someone in charge would be available

The inspection team consisted of an adult social care inspector.

Before this inspection we looked at the Provider Information Response (PIR) for this service. 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. We also reviewed safeguarding alerts and information received from a local authority.

After our inspection we telephoned four family members of people who used the service, spoke with two people, and observed one person. We also looked at three staff personnel files and four care plans for people who used the service. We spoke to five staff including the registered manager. We looked at other documentation relating to the running of the service.

Is the service safe?

Our findings

People and their relatives told us they felt Weatherstones Court was the perfect place for them or their family members. Comments included, "Oh it is lovely, they are so happy." Someone else said, "They are living the life we never thought was possible, I can't praise them (staff) enough." Someone who lived at Weatherstones Court told us they loved their apartment and they were proud of it.

Staffing levels were safe and individual people were supported by adequate numbers of staff through a mixture of permanent staff and regular agency workers who had been safely inducted and selected to work with people with autism. We saw that the recruitment and selection of permanent staff remained safe, and staff were only appointed following a robust recruitment check.

Medication was well managed. All staff had received training by a competent person in the administration of medication and additionally received annual updates and competency refreshers. Medication was stored in people's own apartments, and we sampled six MARs (Medication Administration Records) which were completed accurately by staff, and had been audited by the service and the area manager.

Risks to people's health and wellbeing were appropriately assessed and measures were put in place for staff to follow and support people to remain safe. We saw risk assessments in relation to diets, medication and the environment. For example, we saw that one person was supported by two staff in the community to access activities. There was a process in place to support this person if they became a risk to themselves or others and this was accompanied by a step by step process for staff to follow. There was also a risk assessment in place based on the layout of the person's apartment and communal areas, and there were PEEPS in place for each person. The PEEPS indicated which level of support each person would need to have in order for them to leave the premises in the event of an emergency.

Some of the communal areas of the apartment block looked tired. Staff and relatives of people who lived at the service felt this was an issue. The registered manager and other staff had supported people to report this to housing provider, however they had not taken action, and this was on-going.

There was a process in place to record, monitor and analyse incidents and accidents, which included an explanation of why the incident occurred and any remedial measures put in place as a result of this. The registered manager was able to describe how a recent analysis of an incident allowed the staff team for one person to find out the cause of a pattern of unusual behaviour. Once the cause was established, the person's support plan was changed to reflect this.

We checked some of the recent safeguarding records and saw that recommendations were highlighted and included in future practice to minimise the risk of re-occurrence, particular one safeguarding in relation to financial abuse. Additionally, staff were able to explain the course of action that they would take if they felt someone was being harmed or abused, this was reflected in the organisations safeguarding policy. Staff we spoke with also said they would whistle blow to external organisations such as CQC if they felt they needed to.

Is the service effective?

Our findings

Family members told us that they liked the staff who supported their relatives and believed they had the skills to support them. One family member said, "They [staff] are brilliant with [relative]." Another family member said, "Well, the regular staff are really good. We just worry when [relative] seems to have such a disrupted team." One person said, "The staff are excellent, they help me."

Staff told us that they enjoyed their training, and it was 'in depth' and 'good quality'. An overview of the training matrix and staff certificates concluded that all staff were up to date with the provider's mandatory training, as well as other specialised training which helped to assure that staff had a specific set of skills to support people at Weatherstones. For example, staff were all trained in Autism to an advanced level, TEACCH, and MAPA, which stands for Management of Actual or Potential Aggression. Staff had received supervision in line with the service's policy and procedure, and all staff had received an annual appraisal.

The staff made sure that people had choice and control over their lives and supported them in the least restrictive way possible. 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 Mental Capacity Act (MCA). Our scrutiny of people's support files indicated that appropriate referrals had been made to the Court of Protection (CoP) to legally deprive someone of their liberty. Other capacity assessments were clear, decision specific, and highlighted which choices people could make for themselves and where they needed support. Complex and sensitive issues had also been explored and addressed confidentially.

Some people were supported with meal preparation as part of their care needs. People we spoke with told us they felt the staff made them enough to eat. Staff we spoke with confirmed they were able to support people with this, and we saw menus devised by people themselves and displayed in their own apartment. One person told us how they were supported to have 'themed' nights with food from around the world, and Chinese was their favourite.

Medical logs were kept in people's care plans. Anytime people visited the GP or other medical professional appointment details of this appointment were logged by the staff. This included any follow up information and medication changes that had come about as a result of the visit.

Is the service caring?

Our findings

We received the following comments in response to the caring nature of the staff. "They are just lovely with [family member]". "Nice", "Friendly" "Helpful" "They go out of their way". "We feel reassured knowing that [family member] is there". "The regular staff are great." "Absolutely brilliant." Someone who had limited verbal communication used their own signs and gestures to tell us that they liked the staff.

We saw that the service had information about advocacy services, and would signpost people to the appropriate service if they required this support. There was no one receiving advocacy support at the time of our inspection.

There was evidence in people's care plans that they had been involved in their reviews. We saw a document in each person's care plan which was called 'my review'. Relatives we spoke with confirmed that they had been invited to their relative's reviews and used this time to discuss what was working and was not working within the service. One relative said, "We do always speak up if we think things need changing." The providers PIR stated 'Our review processes put's service users at the heart of the process and ensures that they are involved and contribute throughout the entire process.'

Staff were able to describe the types of things they did to encourage people to be independent and how they respected their dignity. One staff member said, "I make sure the doors are closed and ask them if they want support with personal care." Another member of staff said, "The more you encourage people the more they will try and do for themselves. I enjoy helping people learn new skills. It's rewarding when you get the support right and can see how it has affected people."

Is the service responsive?

Our findings

Everyone we spoke with; relatives and people who lived at Weatherstones Court said that they felt their needs and the needs of their family member were being met by staff., They told us that Weatherstones Court was the right place for them. One relative said, "Its lovely, it really suits them."

However, some relatives told us that staffing was not always consistent enough for their family member. Some staff and family members we spoke with told us that the service did not have enough staff in permanent employment to be able to support people in a way which was right for them. We saw that there was a heavy reliance on regular agency staff; We saw that the service tried to use the same agency staff so people could become familiar with them and it would not upset their routines. One family member said, "They are trying (The service) but they just can't seem to get regular team members." A staff member told us "There isn't enough staff." A relative of someone who lived at Weatherstone Court said, "It doesn't seem to bother [person's name] but we were promised they would have a regular team around them." One relative told us the lack of a regular team around their family member had caused them some distress, they said, "[Person's name] just isn't themselves at times, its important they have a permanent team." They did however go on to say they felt the organisation would address these concerns. Most relatives told us their family member required consistent faces as routine was important to them and they had noticed a negative change in some of their family member's behaviours.

The registered manager was honest about the staffing issues which the service was struggling with. We saw that the service had explored different avenues to try and encourage potential new staff, which included posting flyers in the local area, advertising in local shops, and attending job fares. We saw there was a regular list of agency workers used and the service had their own bank staff list. The registered manager said they knew they had to improve, but they were trying their best. We were sent supporting evidence after our inspection to show that families were kept up to date and consulted with around staff recruitment and retention. The service was working hard to ensure that they were advertising effectively and doing what they could to support the existing staff with getting to work. This included car pools, and arrangements for staff to be collected from local train and bus stations.

Support plans were in depth and explained the backgrounds, likes, dislikes and routines of people in full. Each person had a one-page profile or a pen pic in place, which described what was important to the person and how they liked to be supported. We saw information regarding any clinical diagnosis as well as any behaviour which the person needed support with. For example we saw that one person had problems with bowel management, this was because some foods made them ill. However the person could not tell staff verbally when they felt unwell. and depended on staff knowing them well. We saw a description within this person's support plan describing facial expressions they may use to tell staff they were in pain. For example, 'I may bring you my toothbrush to say I have toothache.'

We saw how some people's care packages had been reduced due to them gaining more skills and requiring less one to one support. We saw how one person had gained enough skills to be able to spend time on their own in their apartment and only accessed the shared support in the building when needed. People were

encouraged to maintain their relationships with families, as well as other relationships which had been forged outside in day centres and other recreational activities. One person was supported every Sunday to have lunch with their partner, another person told us how they were supported to go horse riding and showed us the awards they had.. We saw this person was matched with staff who shared similar hobbies.

We spent time looking at the complaints procedure for the service. We saw that there had been no formal written complaints since the last inspection. However, the registered manager was honest and told us that they often had to address verbal concerns regarding the staffing situation at Weatherstones Court, as some family members were concerned about this. We saw that the complaints process was displayed and presented to people depending on their individual need for communication and understanding. Everyone we spoke with told they would not hesitate to raise a complaint if needed. One family member said, "I am confident it would be addressed."

Is the service well-led?

Our findings

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.

Everyone we spoke with told us they liked the registered manager and referred to them by name. Comments included, "[Registered managers name] is absolutely lovely." "Really friendly and hands on." "Easy to get on with". "Yes the registered manager and their manager are nice. We get on fine with them."

All of the staff described the culture of the service as person centred and a good company to work for. All of the relatives we spoke with said they would recommend Autism Together as a support provider.

The service had policies and guidance for staff to follow. For example, safeguarding, whistle blowing, compassion, dignity, independence, respect, equality and safety. Staff were aware of these policies and their roles within them.

The registered manager understood their responsibility and had submitted statutory notifications as required to CQC, for any incidents or changes that affected the service. The rating from the last inspection was displayed in the office, communal areas, and website in line with requirements.

We looked at the quality assurance systems and processes to monitor how the service was operating and to drive forward improvements. A range of audits and checks were undertaken. The registered manager completed a management audit each month and the deputy locality managers completed an audit every week. The checks included care files, staff training and medication. We saw that action plans were formulated where issues were found and these were checked as part of the next audit.

There was a formal process in place to gather the views of family members and people who used the service. We saw that questionnaires were sent out annually, however, the last survey had a poor return. The registered manager said they had open door policy and most feedback was discussed face to face with people.