

Respond Care Limited

Ardington House

Inspection report

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Northamptonshire
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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

About the service

Ardington House is a care home which provides supported short breaks to people with learning disabilities; it is registered to provide accommodation and personal care for five people. At the time of the inspection there were 15 people with personal care needs regularly accessing the service for short breaks at different times.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service and what we found

People had developed positive and trusting relationships with staff which kept them safe from harm or abuse. They had detailed personalised plans of care to enable staff to provide consistent care and support in line with their personal preferences. The risk management plans mitigated any risks identified to their care.

There were enough staff to support people in the way they wished, and the provider had undertaken recruitment checks which assured people were cared for by suitable staff. People were protected against the risk of infection and received their medicines on time.

People were supported to maintain good health and nutrition. Information was provided to them in an accessible format which enabled them to make decisions about their care and support. They were supported to have maximum choice and control of their lives and staff supported them in the least restrictive ways possible; the policies and systems in the service supported this practice.

People were well cared for and supported to live as full a life as possible within the community. They were enabled to pursue their interests and be involved with activities within the home and community. Staff encouraged and supported people to fulfil their aspirations and desires. They had the knowledge and skills to support people in the way they wished, respecting their individuality and encouraging them to be as independent as possible.

People and their relatives knew how to raise a concern or make a complaint and the provider had implemented effective systems to manage any complaints received. The service had a positive ethos and an open culture. The registered manager was approachable, understood the needs of people, and listened to staff and relatives.

There were systems in place to monitor the quality of the service and drive improvements. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Requires Improvement (published 5 February 2019).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Ardington House

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Ardington House 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 service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority who commission placements at the service. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and three relatives about their experience of the care provided. We spoke with five staff including support staff, senior support staff, the HR administrator, the

registered manager and a director.

We reviewed a range of records. This included three people's care records and medicine records. We looked at three staff recruitment files and a variety of records relating to the management of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were cared for safely. They had developed trusting relationships with staff and looked comfortable being supported by them.
- Staff knew what signs to look for to keep people safe from harm or abuse and there were up to date procedures in place for them to follow. They were confident that if they reported any concerns to the registered manager or provider they would take the appropriate action. One member of staff said, "I have no concerns here, everyone gets well here, I would speak to [registered manager] if I had any concerns."
- The registered manager fully understood their responsibilities to keep people safe and knew to raise any safeguarding concerns with the local authority and notify the Care Quality Commission.

Assessing risk, safety monitoring and management

- People's care needs had been risk assessed and care plans provided staff with the information they needed to manage the identified risk.
- People had personal emergency evacuation plans in place which meant staff and emergency services knew what support they needed in the event of an emergency. Staff described to us what they would do in the event of a fire.
- Fire and health and safety checks were in place. This ensured people and staff were safe in the home environment.

Staffing and recruitment

- People were safeguarded against the risk of being cared for by unsuitable staff because there were appropriate recruitment practices in place, which were consistently followed.
- Staff had been checked for any criminal convictions and satisfactory employment references had been obtained before they started to work at the service.
- There was enough staff to meet people's needs and the registered manager endeavoured to ensure people were supported by the staff they knew.

Using medicines safely

- Medicines systems were well organised, and people received their medicines when they should. Safe protocols for the receipt, storage, administration and disposal of medicines were followed.
- Staff had received training to administer medicines and their competencies were tested regularly.
- Audits of medicine administration were undertaken which ensured any shortfalls were addressed quickly.

Preventing and controlling infection

- People were protected by the prevention and control of infection.
- Staff were trained in infection control and had the appropriate personal protective equipment to prevent the spread of infection.

Learning lessons when things go wrong

- Incidents and accidents were monitored and reviewed to identify any learning which may help to prevent a reoccurrence.
- Lessons learnt from incidents were discussed with staff at regular staff meetings and individual supervision meetings. One member of staff said, "We get a chance to talk through any incidents in supervisions and outcomes are shared to help us improve."

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and the feedback from people and their families confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were fully assessed before any care was agreed and delivered. This ensured there was sufficiently trained staff to provide the care and support required.
- People and their families were involved in developing and reviewing their care plan. One relative said "[Person] and I are always involved with their care plan and the service is flexible to meet our needs."
- Care records included details of people's health conditions, preferences, their likes and dislikes, communication needs and their cultural background.

Staff support: induction, training, skills and experience

- People received support from staff that were competent and had the skills and knowledge to care for their individual needs.
- Staff training was relevant to their role and the training programmes were based around current legislation and best practice guidance. Staff told us they received training regularly and records confirmed this.
- Staff had regular opportunities to discuss their performance and training needs. One member of staff said, "Supervision with [registered manager] gives you the chance to talk through any incidents or training which helps improve the service."

Supporting people to eat and drink enough to maintain a balanced diet

- Staff supported and encouraged people to eat, and food was prepared for people on specialist diets such as pureed or mashed food for people with swallowing difficulties.
- Staff knew people well and planned meals around their knowledge of people's likes and dislikes. One person told us, "The food is lovely."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's medical needs were assessed, and advice sought to ensure staff had the information they needed to support people effectively and safely.
- People's care plans contained the information staff needed to access healthcare services if required.

Adapting service, design, decoration to meet people's needs

- Ardington House had been adapted to meet people's individual needs. The communal areas were large and bright. There was a large enclosed garden for people to access and enjoy.

- People were encouraged to bring in their own bedding and personal items to make their stay more comfortable and relaxed.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA

- People's mental capacity had been assessed and where people had been assessed as lacking capacity to make certain decisions we saw that best interest decisions had been made and recorded.
- The registered manager had applied for the appropriate authorisation in relation to DoLS.
- Staff sought people's consent and understood the principles of the MCA. They promoted people's independence and for them to have as much freedom as possible.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were treated well by staff who were kind, caring and knew them. Staff treated people as individuals and understood their needs.
- People looked calm and appeared happy around staff. One person said, "Everyone [staff] is nice here." A relative said, "The staff are very good, young but with old heads, I have confidence in them all."
- People's care plans contained information about their equality characteristics and preferences which ensured staff provided consistent support.

Supporting people to express their views and be involved in making decisions about their care

- Where possible people and/or their relatives were involved in making decisions about their care. Various aids to communicate such as pictures and sign language were used to support people to express their views and preferences.
- Staff were intuitive and recognised people's different facial and body movements when people were expressing themselves.
- We saw there was information about advocates in people's care records. An advocate is an independent person who can help someone express their views and wishes and help ensure their voice is heard.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful in the way they spoke and supported people. They encouraged and promoted people's independence. One person said, "I can go to bed when I like."
- People were encouraged to do things for themselves and were supported to go out in the community when they expressed a wish to do so.
- People were able to contact their families when they wanted to. One person used an application on their computer to remain in contact with their friends and family.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People had individualised care plans which detailed the care and support they wanted and needed; this ensured staff had the information they needed to provide consistent support for people.
- Staff knew people well which was demonstrated in the way they responded to people. They knew instinctively what people wanted and how they liked to spend their time.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People had individualised communication passports and emergency grab sheets which provided detailed information about people's communication needs so health and other professionals knew how best to communicate with them.
- There was information in pictorial forms to support people to communicate their wishes. Staff had undertaken training in Makaton and had developed individualised ways to communicate with people.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were encouraged and supported to take part in activities both in the home and in the local community. One person said, "It's good, I get to do lots of things, I like going to a youth club and doing some karaoke here."
- Ardington House provided the opportunity for people to experience life away from families and develop new relationships. People had access to social media to maintain relationships with friends and family.

Improving care quality in response to complaints or concerns

- People were encouraged to give their feedback about their stay, the information was used to look at ways of improving any future stays people had.
- People and their families knew who to speak with if they were unhappy or had a concern. One relative said, "When I had a concern I spoke with [registered manager] she was able to check things out for me. I have had no complaints."

End of life care and support

- The service did not provide end of life care.

- Staff were aware and knew what to do in the event of a sudden death.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People were at the centre of everything the service did; the registered manager ensured people were involved with their care and staff knew to treat people as individuals and respect their wishes.
- The provider and registered manager were focussed on providing the support and care people required to meet their individual needs and promote their independence and choices.
- Staff spoke positively about the people they supported and were proud of the achievements people had made. They felt valued. One member of staff said, "[Provider] is good at telling us how good we are."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Feedback was sought from people and their families about their experience of the service. One relative said, "This is an incredibly person-centred service, they listen to you and make any changes needed."
- Staff felt involved and engaged in the development of the service. One staff member said, "The managers are all friendly and open to questions and ideas."
- There were regular staff meetings. We saw information was shared with staff around any incidents that may have occurred to ensure lessons were learnt and everyone was kept up to date with any changes.
- Training opportunities were looked for to enhance the training and experience for staff.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Staff were supported and focussed on providing people with the support they needed to enable them to be as independent as possible. They had regular supervisions and observations of their work were undertaken which ensured they provided the care and support at the standards required.
- There were effective systems in place to monitor the quality and standard of the service which drove improvements. The provider had clear oversight of the service. There were monthly audits in place relating to the care provided. These included support plans, health and safety audits, staff training and accidents and incidents.
- The registered manager had notified the Care Quality Commission (CQC) about events they were required to by law. We saw the provider had displayed the last inspection rating as required.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager was aware of, and they and the provider had systems in place to ensure compliance with the duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.
- Staff knew about how to whistle-blow and knew how to raise concerns with the local authority and CQC if they felt they were not being listened to or their concerns acted upon.

Working in partnership with others

- The provider and registered manager liaised with the local authority commissioners to ensure the service developed and met the needs of a changing population.
- Staff worked in partnership with other agencies involved in people's care, such as social care and health professionals.
- The feedback we received indicated the registered manager was receptive to ideas and strived to build positive working relationships with professionals and families.