

Gloucestershire County Council

The Vicarage

Inspection report

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Date of inspection visit:
22 October 2019

Date of publication:
14 November 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

About the service

The Vicarage is a care home which provides short term respite breaks for up to five adults with learning and/or a physical disability. There were three people staying at the home on the day of our inspection.

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 felt safe when they stayed at The Vicarage. People's relatives told us they had no concerns about safety. People were supported by a stable and familiar staff team.

Staff told us they felt suitably trained and supported to carry out their role. They knew how to escalate any concerns and were aware of people's personal risks when providing support to them.

Most people's needs were assessed before they used the service to ensure their needs could be met. Staff tried to gain as much information as possible for people who were admitted to the home in an emergency. People's care plans reflected their support needs, risks and emotional and social support requirements. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People and relatives told us staff were compassionate and caring. We observed staff encouraging people to be independent. They protected people's privacy and treated them with dignity and respect.

People, relatives and staff continued to think that the home was managed well. The registered and deputy managers were described as approachable and caring. Systems were in place to monitor the delivery of the service, manage concerns and complaints. Sufficient numbers of staff were made available to meet the needs of people.

The managers and staff worked collaboratively with health care professionals, other services and relatives to ensure there was a consistent approach in the care of people. People received their medicines as prescribed and were referred to health care services as needed.

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 Good. (published 18 May 2017).

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

The Vicarage

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

The Vicarage is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and five relatives about their experience of the care

provided. We spoke with five members of staff including the registered manager, deputy manager and three care staff. We observed how staff engaged with people to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with four professionals who regularly visit 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 and their relatives told us that people felt safe staying at The Vicarage. One person told us, "Yes I feel safe when I stay here. I am given a key, so I can lock my room door, so I know my stuff is safe." This view was shared and confirmed by people's relatives. One relative wrote, "We have always felt assured that [name] is safe and in good hands at The Vicarage."
- Staff had received appropriate training and had a good understanding of safeguarding policies and procedures. They were clear of their responsibilities to report any suspicions of abuse or harm and if anyone disclosed any information of concern to them.
- The registered manager told us they were vigilant in monitoring people's welfare and would investigate any concerns or unknown bruises. They were aware of their legal requirement to report any safeguarding concerns.

Assessing risk, safety monitoring and management

- Risks associated with people's health and well-being had been assessed and were managed well and regularly reviewed. Staff worked in partnership with other agencies to ensure they fully understood the management of people's risks.
- People's keyworkers carried out pre-admission telephone calls to those people and their relatives who used the service regularly to gain a current understanding in any changes in people's health and well-being. Records showed, and relatives confirmed that this practice always took place.
- There was a balanced approach to enabling people to retain their independence and trying out new opportunities while staying at the home and managing any associated risks, such as risks associated with accessing the kitchen or community activities.
- Risks associated with people's behaviours and emotions were managed safely. Information about possible triggers and actions staff should take if people became upset were recorded and known by staff. Any behavioural incidents were recorded and analysed to identify the possible triggers. Strategies were implemented to help prevent further incidents such as reviewing people's timings of care and activities.
- Relatives reported that people with more complex health needs were managed well by staff. For example, seizure management plans and guidance were in place for one person who suffered from epilepsy.

Staffing and recruitment

- People were supported by sufficient numbers of staff to meet their needs. The levels of staff were determined by the complexity of the needs of people booked to stay at the home. Staff confirmed that additional staff were made available if they had assessed that people required additional support or there was an emergency admission. Regular bank or agency staff who were familiar with the home were used to fill any gaps in the staff rotas or when extra support was needed.

- People were supported by a stable staff team which helped to reduce people's anxieties when they stayed at The Vicarage as the staff team were known to them. One relative said that the familiar staff team was the service's 'greatest asset' as this helped their relative to quickly settle in. Another relative wrote to us and said, "There appears to be a low staff turnover, which is very important for our son, as he benefits from continuity of care from familiar staff."
- Since our last inspection, there had been no recruitment of new staff. However, we were assured that the registered manager would use safe recruitment practices in conjunction with the provider's human resources department to check if staff were of good character before being employed in the home.

Using medicines safely

- People received their medicines as prescribed as safe medicines management processes were being used. People's medicines were stored and managed in line with best practice and guidelines.
- There was a clear system for people's medicines to be checked and booked in and out when they arrived and left the home. Any discrepancies were checked with people's relatives, GP or pharmacist before staff administered people's medicines. One relative praised the skill of staff in managing their relative's complex medicines regime.
- People's medicines care plans provided staff with the information they needed to safely and accurately administer people's medicines. Colour coded body maps directed staff on where to apply people's medicinal creams.
- Medicines administration records (MARs) were completed without gaps and included a record of ongoing stock balance of each medicine.
- Staff had been trained and were regularly assessed in their management of people medicines. Any poor practices or medicine errors were immediately investigated and addressed by the registered manager.

Preventing and controlling infection

- The home was clean and odour free. Infection control audits were carried out to ensure the home and kitchen was being effectively cleaned and to monitor the safe handling of food. The home's kitchen had recently been assessed by the food standards agency and awarded a five-star rating for their kitchen hygiene practices.

Learning lessons when things go wrong

- Systems were in place to monitor and learn from incidents and accidents. Records of incidents were detailed and reviewed by the registered manager. Learnings were taken from each incident and changes were made to people's care plans to reduce the risk of repeat incidents and shared with staff.

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 Good. At this inspection this key question has now remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People continued to receive effective care based on current best practice as staff had sought advice from health care professionals in specialist areas to ensure their staff care practices were current.
- The local authority initially assessed the needs of people and their relatives to determine their short break requirements. Information from the local authority, people and their relatives were shared with The Vicarage to enable them to assess if they could meet people's needs and could provide the family with regular breaks.

Staff support: induction, training, skills and experience

- People were supported by staff who were trained and supported to carry out their role. They had received additional training in subjects such as autism and swallowing difficulties which assisted them in better understanding people's physical and mental health needs.
- A training week was arranged each year to provide staff with an opportunity to carry out further professional development and refresh their training and knowledge.
- Records showed, and staff confirmed that they received regular supervision and an annual appraisal to review their work practices and personal development objectives.

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

- People could choose to eat their meals in the dining rooms or other areas of the home. People were provided with a choice of home cooked foods and healthy snacks such as fruit and yogurts were offered. Pictorial menus were displayed to help people choose their meals. Any cultural and dietary needs were accommodated.
- Guidance was in place in people's care plans where people had risks associated with their eating and drinking such as poor appetite or risk of choking. People's independence in relation to their eating and drinking was encouraged and staff monitored those people who were at risk of choking or losing weight. Staff encouraged people with poor appetites by offering them their favourite meals and drinks or getting them involved in the preparation of the meals.

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

- People were supported to maintain their well-being during their stay at the home and access health care services as needed.
- People's oral health care and preferred routines were known by staff. They assisted and prompted people

to maintain good oral health care during their stay.

- Information about people's medical conditions and the health services which supported them were recorded in people's care plans. The managers told us they would contact people's relatives and allocated health care service if people became unwell during their stay. Alternative people were supported to gain 'temporary resident' status at the home's local GP.
- Staff worked collaboratively with health care professionals to enable staff to better support people. For example, one health care professional wrote to us and said, "Staff know their clients and families extremely well and therefore they are able to ensure clients are settled as quickly as possible when in their care.More importantly, the home will look to resolve issues that arise whilst a client is in their care – e.g. urgent wheelchair or orthotics repairs."
- People's care needs were continually met as people moved between services. Staff effectively worked and communicated with different organisations to ensure there was a smooth transition and sharing of information when people arrived or departed from The Vicarage to another service such as a day centre or college. For one person, a diary was used to help communicate the person's well-being during their stay to the day centre and their family.

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

- The home had been equipped with specialist equipment such as ceiling track hoists, specialised baths and showers to enable people with more complex physical needs to use the service. The provider had systems and contracts in place to maintain and service the premises and equipment and address any issues.
- The home and garden area were being refurbished and updated. People helped staff to choose the colour schemes and soft furnishings of the home. One person smiled, said yes and nodded their head when we asked if they liked the décor of the home and their bedroom.

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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service worked within the principles of the MCA and understood the importance of supporting people to make their own decisions about their care.
- Staff understood the importance of providing people with information about their care in an accessible way to enable them to make their own decisions
- A checklist was used to help staff identify if any of their practices were restricting people's liberty. Where applicable, DoLS applications had been completed appropriately and submitted to the relevant authority.

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 continued to receive good care from staff who were kind and compassionate. Throughout our inspection, we heard and observed staff were genuinely caring towards people and providing them with reassurance if they expressed any anxieties or worries.
- People clearly felt at home at The Vicarage and were seen to freely wonder around the home, sitting and chatting in the lounge or spending time in their bedrooms. People helped themselves to drinks and snacks in the kitchen and were supported by staff to carry out activities in the home and community.
- Staff had developed strong relationships with people and their relatives and gained a good understanding of their needs and preferences. Photographs of staff on duty were displayed on the wall to help people recognise who they would be supported by.
- One relative expressed their gratitude about the kindness and compassion of staff. They said comments such as "They are amazing" and "I can't fault them." They went on to tell us they were 'touched' by the caring nature of staff who contacted them as they had heard that their relative had become ill and required hospital treatment.
- People and relatives all stated that they felt the home was homely and friendly. One relative described the service as "It's like being from home to home for them."

Other comments from relatives included, "The staff are lovely, they have the patience of saints"; "The Vicarage is a first-class care home where we feel we can trust and relax while he is there" and "We have found the staff to be both caring and dedicated."

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

- People and their relatives were involved in the decision to use The Vicarage for respite breaks to give people's relatives a break from their role as a carer. Where possible, people were provided with opportunities to visit the home such as visiting for lunch to help them settle into the home and get to know staff before they stayed overnight. They were encouraged to bring personal belongings to personalise their bedrooms. For one person, they had been allowed to bring their pet which had helped them feel calmer and more relaxed.
- People had allocated key workers, who took responsibility for their individual care planning and review and to ensure the service had the up to date information about people's current needs.

Respecting and promoting people's privacy, dignity and independence

- Staff supported people to promote their independence during their stay such as personal and daily care activities.

- People's unique way of expressing their needs and self-calming strategies were respected in a non-judgemental manner. People were supported to have time in their bedrooms or the communal areas to enjoy time in private or in the company of others. Where possible, arrangements were put in place for people to stay at the home with other people that they had formed a friendship with.
- We observed staff adapting their approach and style of communication according to people's needs. They spoke to people respectfully, offering them choice and reassuring them when needed.

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 continued receiving personalised care and were supported to maintain good standards of personal hygiene. We were told that oral care health plans would be implemented after staff had received specialist training in oral health care. These would provide staff with comprehensive and personalised guidance on how to support people with their mouth care.
- Staff knew people well and were attentive to people's needs and always tried to ensure people's preferences and routines were accommodated and catered for. Some relatives told us the importance of keeping to people's routines which helped their relative to quickly settle during their stay.
- People's care plans reflected people's support requirements as well their eating and drinking needs, medicines support and other day to day activities. Information about people's life history, cultural and spiritual needs and activities they enjoyed were also documented to direct staff. The managers discussed with us how they would support people who wanted to carry out or discuss any activities that were associated with their culture, religion or sexuality. People and relatives all told us they felt they were treated fairly and were free from discrimination.
- The service responded effectively to emergency admissions. One relative explained how caring and professional staff were when their relative had to be admitted to The Vicarage due to an emergency in their family home.

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.

- Staff had developed a good understanding of people's individual communication needs. They used tools such as white boards and photographs of items such as meals to help people communicate their wishes and choices. Information about people's preferences, ways and methods of communication was shared between services to help the continuation of care.
- The registered manager had recently attended an easy read training course to assist them in understanding the different formats which are available to communicate people who have limited communication. An accessible welcome leaflet had been developed to help people better understand the service.

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 told us they enjoyed their stay at The Vicarage. One person said, "It's like my holiday here." Some people enjoyed trying out new activities or being supported by staff to follow their interests and take part in activities of their choice such as shopping, swimming and bowling.
- For others, they preferred to continue with their daily routines and activities when they stayed at the home.
- People could access the wider community with the support of staff and the accessible minibus. People and staff were invited to attend local community events such as Christmas concerts.

Improving care quality in response to complaints or concerns

- There had been no complaints about the home since our last inspection. The registered manager told us they dealt with all concerns promptly and would manage any formal complaints in line with the provider's policy. The provider's complaints policy and procedure was made available to people and their relatives.
- An easy read complaints policy and information about advocacy services was displayed in the home to enable people to raise any concerns. People and their relatives told us they were confident that any issues would be appropriately addressed in a timely manner.

End of life care and support

- No one using the service required end of life care at the time of our inspection. However, the managers had undertaken a palliative awareness course and were making progress in developing systems and had plans to train staff to support people in end of life care if required.
- The registered manager explained, that they would not plan to provide care to people who were living at the final stages of their life, however they needed to be better informed to enable them to take appropriate action if people became significantly unwell while staying at the home. They were working with relatives to sensitively plan ahead.

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 Good. At this inspection this key question has remained the same. 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

- The home continued to be well managed. The registered manager and deputy manager were experienced in delivering short break care. They demonstrated a passion to deliver high quality care and to ensure people enjoyed their stay at The Vicarage.
- The culture of the home and the staff approach centred on the safety, wellbeing and happiness of people.
- Staff had worked at the service for many years and knew people well. They understood their role and what was required to ensure people received safe and person-centred care. Relatives were confident that people were well cared for during their stay and felt the home was well managed. They told us the provider delivered an effective service which allowed them to have a regular respite break from their role as a carer.

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

- Comprehensive audit systems were used to monitor the safety and quality of the care being delivered and the home's environment and equipment. These included infection control and medicines audits. The audit results were monitored by the registered manager and discussed at staff meetings to help drive improvements.
- The registered manager was clear about their responsibilities to escalate and report any concerns about people's well-being. They kept informed of changes in the sector through medical safety alerts, newsletter subscriptions from national organisations, additional training and peer/provider support from the provider's other registered services.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People, their relatives and staff were encouraged to give feedback about the service, share their views and provide suggestions. We were told communication across the service was good.
- Relatives told us they felt The Vicarage was well led and they had confidence in the management and staff team to ensure their relative was well cared for during their stay. One relative said, "The Vicarage appears well led. Staff are very helpful, friendly and obliging. They are efficient, and queries are answered in a timely fashion."

Continuous learning and improving care

- The managers were transparent and open to receiving feedback and making further improvements to the service for the benefit of the people and their relatives. The registered manager said, "We want people's stay at The Vicarage to be enjoyable but also of value to their parents and carer."

Working in partnership with others

- Staff at the home continued to work in partnership with people's families and other services which supported people in the community. We were told staff worked hard to ensure the care provided was similar to the care people received at home. Health care professionals complemented staff about their professionalism and determination to ensure people received high quality care.