

Transitions (Support Specialists) Limited

Eden Place Residential

Home

Inspection report

Pontefract Road
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Tel: 01977780278

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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 was an unannounced inspection carried out on 16 May 2017. This was the first inspection the home had received under the new methodology since the change in provider.

Eden Place provides personal care and accommodation for up to 12 people who have a learning disability. People are supported to be as independent as possible. The home is located in the heart of Wakefield close to all amenities. At the time of inspection there were 12 people at the home.

At the time of our inspection there was a registered manager in the home. 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.

People told us they felt safe and happy. There were effective systems in place to ensure people's safety at the home, whilst also encouraging and promoting their independence. Staff could describe the procedures in place to safeguard people from abuse and unnecessary harm.

There were systems in place in the home to ensure that people received their medication as prescribed.

There were enough staff to meet people's needs, Robust recruitment and selection procedures were in place and appropriate checks had been undertaken before staff began work. Staff were given effective supervision. The registered manager told us she had plans to complete appraisals once staff had been in post for a year. We saw evidence which supported that.

People were supported to eat and drink well and to maintain a varied and balanced diet of their choice. People had access to healthcare facilities and support that met their needs.

People had developed very good relationships with the staff team who treated them with kindness and respect. Systems were in place at the service to ensure that people's views were listened to and their privacy and dignity was upheld and respected.

People's needs had been assessed and care plans outlined their preferences and how they should be supported. Staff showed a good knowledge of these preferences when asked about the people they supported.

People were supported to enjoy activities of their choice in house and in the community. The service had an activity coordinator in place who supported people at key times in the home in the two cabins which were located in the grounds. We saw evidence on the day of inspection of interactions people who told us they liked the activities they did.

The service had quality assurance systems in place which were used to drive improvements within the home. The registered manager had only been in post for the last six months where they had made a big impact on the home in relation to redecoration and maintenance of the home.

Staff told us the registered manager was always approachable and would not hesitate in approaching them if they had a concern. All the staff were complimentary about each other stating they were more like a family.

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.

We saw robust safeguarding procedures were in place and staff understood how to safeguard people they supported. There were effective systems in place to manage risks to the people who used the service which also encouraged and promoted their independence.

People's medicines were stored safely and they received them as prescribed.

There were sufficient staff to meet the needs of people who used the service. Recruitment practices were safe and thorough

Is the service effective?

Good ●

The service was effective.

Staff told us they received good training and support which helped them carry out their role properly.

Staff could describe how they supported people to make decisions, to make decisions and the circumstances when decisions were made in people's best interests in line with the requirements of the Mental Capacity Act (2005).

Health, care and support needs were assessed with people who used the service and met by regular contact with health professionals.

Is the service caring?

Good ●

The service was caring.

People had care plans in place which described all aspects of their support needs.

People were supported by staff who treated them with kindness and were respectful of their privacy and dignity.

Staff and people who used the service had a good rapport and

had developed meaningful relationships.

Is the service responsive?

Good ●

The service was responsive

People's needs were fully assessed and reviewed when any changes to needs and wishes were identified.

People had good access to activities in the community and their home. They were also supported to maintain friendships and family contact.

There were systems in place to ensure complaints and concerns were responded to. People were given information on how to make a complaint.

Is the service well-led?

Good ●

The service was well-led.

There were effective systems in place to assess and monitor the quality of the service.

People had the opportunity to say what they thought about the service and the feedback gave the provider an opportunity for learning or improvement.

Accidents and incidents were monitored by the registered manager to ensure any trends were identified and acted upon.

Eden Place Residential Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on 16 May 2017 and the visit was unannounced. This inspection was carried out by one adult social care inspector.

During our inspection we spoke with six people who used the service, two relatives of people who used the service and three staff including the registered manager. We spent some time looking at documents and records that related to people's care and the management of the service. We looked in detail at three people's care plans. .

Before our inspection we reviewed all the information we held about the service. This included any statutory notifications that had been sent to us. Before the inspection, the provider is sometimes asked to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. At this inspection we did not ask the provider to complete one. We contacted the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

Is the service safe?

Our findings

People said they felt safe and well looked after. One person said "I am really happy I can't complain at all." One person when asked what they liked about the home said they enjoyed going in the garden and helping sweep up. They also said they got the help they needed when they required it. A relative told us; "I feel [name of person] is safe and in good hands all the staff here are brilliant. I have no concerns at all."

We saw evidence the provider followed robust practices when employing new staff. Background checks were made, including taking references from former employers and contacting the Disclosure and Barring Service (DBS) before new staff commenced working in the home. The DBS is a national agency which holds information about individuals who may be barred from working with vulnerable people. Making these checks helps providers make safer recruitment decisions.

We saw positive interactions with staff and people who used the service throughout our visit and people who used the service were happy and comfortable with all the staff. There was an excellent rapport between people who used the service and the staff. Staff said they treated people who used the service well.

There were safeguarding procedures in place to make sure concerns about the safety of people who used the service were appropriately reported. Staff were able to describe different types of abuse and were clear on how to report concerns outside of the service if they needed to. This is known as whistle blowing. Staff were familiar with the provider's safeguarding and whistle blowing procedures. Staff said they had received training in the safeguarding of vulnerable adults and the staff training records confirmed this.

Through our observations and discussions with the registered manager and staff we concluded there were enough staff with the right experience and training to meet the needs of the people living at Eden Place.

Risks to people who used the service were appropriately assessed, managed and reviewed. We saw risk assessments had been carried out to minimise the risk of harm to people who used the service, while also maintaining and promoting independence. For example, making hot drinks and cooking. The risk assessments were also linked to care plans and activity involved in care delivery such as bathing or showering. The assessments identified any hazards that needed to be taken into account and gave staff guidance on the actions to take to minimise risk of harm.

We saw there were systems in place to make sure the premises and equipment was maintained and serviced as required. Records we looked at showed gas and electrical safety tests were carried out at the correct intervals. Records also showed that fire fighting equipment had been serviced.

We looked at a sample of medicines and records for people living at Eden Place as well as systems for the storage, ordering, administering, safekeeping, reviewing and disposing of medicines. Medicines were stored securely and there were adequate stocks of each person's medicines available with no excess stock. Staff who administered medication had been trained to do so and we saw their competency was checked regularly.

We looked at the medication administration records (MAR) for the people who used the service and no gaps in recording were seen which showed they had been given correctly. Where people needed creams and lotions to be applied, we saw there were separate MARs kept which clearly identified the parts of the person's body the cream should be applied to.

When people needed as-and-when medicines, such as those for pain relief, we saw written records which staff could refer to in order to understand what medicines may be needed and when.

Is the service effective?

Our findings

Throughout our inspection we saw that people who used the service were able to express their views and make decisions about their care and support. People were asked for their choices and staff respected these. People were asked if they wanted to go out or how they wanted to spend their time.

We looked at staff training records which showed staff had completed a range of training sessions. There was a rolling programme of training available and staff told us they felt they received the training they needed to meet people's needs and fulfil their job role. One staff member said, "I am impressed with the training. We do a lot now." The training record showed staff were up to date with their required training. If updates were needed they had been identified and booked to ensure staff practice remained up to date. Training included, safeguarding, medication, moving and handling, first aid, mental capacity and equality and diversity.

Staff said they received one to one supervision every two months. The staff were due an appraisal in 2017 which was confirmed by the registered manager. Staff said they found the supervisions useful and a good opportunity to discuss their training needs. Records we looked at showed this to be the case. Staff said they got good support to enable them to carry out their role well. Comments we received included: "We feel supported now in our role. We are kept informed and involved in everything going on we are part of a family."

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are 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 were being met.

We saw the provider assumed people had capacity to make decisions, unless there was evidence to suggest otherwise. A member of staff we spoke with said, "We have to assume that people have capacity." We spoke with staff about the MCA. They were able to give us an overview of its meaning and could talk about how they assisted and encouraged people to make choices and decisions such as making every day decisions and choices.

Where people lacked capacity for a specific decision, we saw this was appropriately tested and documented, for example, in relation to finance. Best interest decisions were then made on the person's behalf, and we saw these included the registered manager and health or social care professionals. No one at

Eden Place was subjected to a DoLS.

Records showed that arrangements were in place that made sure people's health needs were met. Each person had a care plan which included details of their medication, details of visits to or visits by professionals which demonstrated that people had regular check- ups with GPs, dentists, chiropodists and consultants. Staff were aware of the systems in place for people to be reassessed should their needs change. A relative said, "The staff keep us well informed if my family member is poorly we are aware of what is going on."

People had care plans in relation to their preferred food and drink, and details of any dietary requirements were included. For example one person had a digestive condition and received certain foods on prescription. Information about allergies was clearly recorded. We saw food and drinks were available for people throughout the day. We observed staff encouraged people to prepare food and drinks to maintain their independence and hydration and nutritional needs. We saw people took their meals as they liked them.

Is the service caring?

Our findings

People who used the service and the relatives we spoke with were very positive about the service they received; they spoke highly of their experience. People's comments included; "I am very very happy, they are all so kind and nice and do what I ask", "I am very pleased with them all and I have got to know them all so well and I like them", "They are lovely caring people who look after me if I need them." A relative told us, "They are all so caring all of them; I cannot fault any of them I know [name of person] is very well looked after."

People who used the service said they were assisted to maintain their independence and were treated with dignity and respect. One person told us; "I am treated very well and yes they do respect me and my privacy." Another person said, "They encourage me to do what I can for myself but are there to help me if I need it." A relative said, "They all speak so nicely and treat [name of person] with the utmost of respect."

We saw staff addressed people by their preferred name and always asked for their consent when they offered support or help with any care. We found staff were knowledgeable about people's needs and preferences and respected people's right to make choices about how their care and support was delivered. One staff member said, "I treat the people we care for with the respect and courtesy I would expect if I was in their position."

Staff talked about how they ensured people's privacy and dignity was maintained and gave good examples of how they did this. Staff also spoke of the importance of maintaining independence for people who used the service. One staff member said, "We encourage people to do what they can for themselves; it's important to keep people going and gives them their pride." It was clear staff had developed good relationships with people and spoke caringly about them. Staff were trained in privacy, dignity and respect during their induction. The registered manager said they worked alongside staff to ensure this was always put in to practice.

Relatives could visit as and when they wanted and we spoke with two relatives who arrived whilst we were there. They were welcomed by staff who asked them if they wanted a drink. The relative reported being very happy with the service and current staff.

We looked at care records which showed people had been involved in planning their care and support. A person who used the service told us, "I do what I want and I tell them if I am not happy with something." A relative told us they were involved in identifying the care needs their family member wanted and any on-going reviews of care.

Staff told us people's diverse needs in respect of the seven protected characteristics of the Equality Act 2010; and age, disability, gender, marital status, race, religion and sexual orientation were met where applicable. We saw no evidence to suggest that anyone who used the service was discriminated against and no one told us anything to contradict this.

People had personalised their bedrooms with photographs and ornaments giving a homely feel. One person was very excited to show us their room which had just been decorated.

Is the service responsive?

Our findings

People had their needs assessed before they moved into the home. This ensured the home was able to meet the needs of people they were planning to admit to the home. Staff said introductory visits and meetings were arranged to make sure people were compatible and gave opportunity for people to get to know each other.

People received care which was personalised and responsive to their needs. People were allocated a member of staff, known as a keyworker, who worked with them to help ensure their preferences and wishes were identified and their involvement in the support planning process was continuous. They also liaised with family members and other professionals when required. We looked at the care plans for three people who used the service. The care plans were in the process of been updated by the registered manager. Staff were provided with clear guidance on how to support people as they wished, for example, with personal care. Staff had an in-depth knowledge and understanding of people's care, support needs and routines.

Activity was arranged to suit the needs and interests of the people who used the service. Staff said they offered and encouraged activity based on the person's known likes and dislikes. Records showed people who used the service were involved in a wide range of activities. This included; trips out into the community, pub, arts and crafts, gardening. People were actively encouraged to visit family and receive visits from family. The relatives we spoke with told us they were always made welcome. We also saw there was a high degree of emphasis on encouraging independence and participation in daily activity in the service. One relative told us, "I am really pleased with his independence he uses the kitchen all the time now with minimal support from anyone."

At the time of inspection we observed people walking to the cabins which were located in the large grounds of the home. People were supported with art work, jigsaws, bingo, writing and reading. We observed really good interactions with staff and also with people who had made friends at the home. One person told us, "I have my friends here I really enjoy it I can come as I please." Another person told us, "I feel I can do what I want, I go out and help in the garden. I really enjoy this." We observed people gardening at the time of inspection; people had their own sweeping brushes with their names on them.

People who used the service were encouraged and supported to keep in contact with family and friends. The relatives we spoke with said they felt welcome to visit their family member at any time and were warmly received whenever they visited.

We saw the complaint's policy was available in the home and were told this was given to people who used the service and their relatives when they first began to use the service. Staff said people were given support if they needed to raise any concerns.

Staff knew how to respond to complaints and understood the complaint's procedure. They said they would always try to resolve matters verbally with people who raised concerns, and were also aware of people's rights to make formal complaints and the importance of recording this and responding in an appropriate

and timely manner.

The service had not received any formal complaints. There was a complaint's file in the service with all information and documents available should any complaints be made. A relative we spoke with said they had no concerns or complaints but would feel comfortable and confident to speak with any of the staff and raise concerns if they needed to.

Is the service well-led?

Our findings

At the time of this inspection there was a registered manager in post. The manager had been in post for over six months.

We received positive feedback from everyone we spoke with about all aspects of the service. A relative of a person who used the service said they found the home to be well managed and said all the staff seemed to be organised and knew what they were doing. They said they had been kept informed of the changes to the management arrangements at the home. Staff we spoke with were very positive about the support they received by the registered manager and arrangements in the home. One said, "She is a fantastic person, so approachable, here for us and the people we support." Another said the home had been well managed by the registered manager. They said, "[Name of manager] is really organised."

Our observations during our inspection showed the service was person centred, inclusive and there was a positive approach to people's support and care. Staff described the culture in the home as happy, open and all about the people who lived there.

Staff said they felt well supported in their role. They said the management team worked alongside them to ensure good standards were maintained and the management team were aware of issues that affected the service. Staff said they felt listened to and could contribute ideas or raise concerns if they had any. They said they were encouraged to put forward their opinions and felt they were valued team members. We saw staff meetings were held on a regular basis which gave opportunities for staff to contribute to the running of the home. Staff said there was a good emphasis on team work and they felt they had a 'good team'.

The registered manager told us people in the home had 'individual meetings' which were held monthly, these included discussions around activities, holidays, appointments and menus.

People who used the service their relatives and staff were asked for their views about the care and support the service offered. The care provider sent out questionnaires for people in September 2016 when they had just taken over the service. The service had received little response back. The registered manager told us they were looking at more ways of receiving feedback for the September 2017 questionnaires to ensure they received feedback from people to help to continue to improve the service.

Staff meetings were held monthly and all staff we spoke with found these valuable to their learning. Discussions around care plans, observations and mobile phones were on last month's agenda.

The registered manager told us there was a system of a continuous audit in place. This included audits on support plans, medication, health and safety and the premises. We saw documentary evidence that these took place at regular intervals and any actions identified were addressed. We also saw the audits were discussed and reviewed at staff meetings to make sure any learning was shared and actions taken. Policies and procedures were in place and all staff had a record which needed to be signed to say that they had read and understood these. The registered manager was supporting staff with these through team meetings and

supervisions.

Any accidents and incidents were monitored by the registered manager to ensure any trends were identified and acted upon. They confirmed there were no identifiable trends or patterns in the last 12 months. We saw evidence on the day of inspection to support this.