

Avocet Trust

# Durham Street and Endymion Street

## 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 unannounced inspection was carried out on 25 September 2018.

Durham and Endymion 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.

49 - 53 Durham Street is registered to provide care and accommodation for up to five adults with a learning disability. 48 Endymion Street is a terraced property which is registered to provide care and accommodation for two adults who have a learning disability. They are both part of the Avocet Trust organisation, which is a registered charity.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and on-going monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The care service has been developed and designed in line with the values that underpin the 'Registering the Right Support' and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Systems and processes were in place to keep people safe and risks associated with people's care needs had been assessed. There were sufficient staff to meet people's needs and staff recruitment processes and procedures were robust.

Staff received appropriate induction, supervision and training to provide safe and effective care. The registered manager worked in partnership with healthcare professionals and other organisations to meet people's needs.

Observations showed staff were compassionate, kind and caring and had developed good relationships with people using the service. Staff knew people well and promoted their dignity and respected their

privacy. Care plans detailed and provided staff with guidance on how to meet people's individual needs. People using the service were provided with the care, support and equipment they needed to maintain their independence.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; policies and procedures in the service supported this practice.

Medicines were managed safely and people's individual nutritional needs were met. A range of activities were available for people to participate in. People using the service were supported to maintain relationships that were important to them.

The registered provider had a procedure for receiving and responding to complaints about the service. Staff spoken with were fully aware of their responsibilities in supporting people if they needed to complain about the service they received. People using the service had access to an advocate.

The provider and registered manager consistently monitored the quality of the service and made changes to improve and develop the service, considering people's needs and views. People knew the registered manager and were comfortable and confident in approaching them. Staff told us the registered manager was approachable and supportive.

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?**

**Good** ●

The service remains Good.

### **Is the service effective?**

**Good** ●

The service remains Good.

### **Is the service caring?**

**Good** ●

The service remains Good.

### **Is the service responsive?**

**Good** ●

The service remains Good.

### **Is the service well-led?**

**Good** ●

The service has improved to Good.

# Durham Street and Endymion Street

## **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.

A comprehensive inspection took place on 25 September 2018 and was unannounced. The inspection was carried out by an adult social care inspector.

We used the information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

Prior to the inspection we reviewed information we held about the service and requested feedback from other stakeholders. These included the local Healthwatch, the local authority safeguarding team and local authority commissioning and contracts department. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

On the day of the inspection three people were living at 49 - 53 Durham Street and 48 Endymion Street was unoccupied. We observed care and staff interactions with people in communal areas. We spoke with the registered manager, who was also the care manager for east Hull, the care manager for west Hull, three care staff and three people using the service.

We looked at two people's care plans and reviewed medication administration records. The recruitment records, supervision, appraisal and training documents for four staff members were also looked at. We

reviewed documents and records that related to the management of the service. This included audits, maintenance records, risk assessments and policies and procedures.



## Our findings

At our last inspection in March 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

People using the service told us they felt safe and staff supported them to keep safe when they accessed activities and the local community. One person told us, "I like living here, they (staff) are my friends."

Systems continued to ensure safeguarding incidents were addressed. Staff were trained in this area and had a positive understanding of their responsibilities to keep people safe.

Risk assessments provided appropriate guidance for staff to minimise and manage risks and keep people safe. Care files contained risk assessments for all areas where a need had been identified.

Accidents and incidents were recorded and reviewed by the registered manager and senior management team to identify any emerging trends that may need further scrutiny.

Medicines were managed safely at the last inspection and continued to be so. A check of records confirmed people continued to receive their medicines as prescribed.

There were sufficient staff on duty during our inspection to meet people's needs. People using the service told us staff were always available for them. Robust recruitment and selection procedures continued to be followed.

Maintenance safety certificates for utilities and equipment was up to date and ensured the premises were safe. People had personal safety documentation for evacuating them from the building in an emergency, including positive motivators to encourage their cooperation. Fire safety and equipment checks had been regularly carried out and staff had received fire safety training. This meant people using the service was kept safe from the risk of harm.

Staff had received training in infection control and the service was clean, tidy and odour free throughout .

## Our findings

At our last inspection in March 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

People using the service told us staff supported them to access healthcare appointments.

Appropriate healthcare professionals had been included in assessing and planning people's care and treatment to ensure this was in line with best practice. People's care records included guidance from appropriate agencies to ensure their needs were met.

Health action plans were in place detailing specific health needs and clear guidance for staff about monitoring and improving people's health and wellbeing. Strong links with health professionals were maintained and ensured people received effective healthcare and annual health checks.

Throughout the inspection we saw information was available in a variety of formats for people, including the use of pictorial documents. Communication plans were found to be person centred and guided staff in how each person communicated and detailed their role in promoting effective communication.

The registered manager and people using the service told us they were involved in the planning of menus for each day's meals. People told us they went shopping with staff to buy their food and care plans detailed this. Staff promoted people's nutritional requirements.

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 MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

The registered manager continued to have a good understanding of MCA and legislation was adhered to. Staff were knowledgeable about processes and could give examples of when best interests were used, when people were unable to consent to medical interventions.

The service provided a homely, personalised environment for people living there and consisted of two bungalows, a two-bedroomed house and a self-contained flat. Furniture and décor had been chosen by the people using the service. The registered manager monitored how the building met people's needs and when their needs changed, adaptations were made to enable them to maintain their independence. For example,



one bathroom looked tired, refurbishment work was planned for 28 September to make the bathroom into a wet room to accommodate people's changing needs.

Staff continued to be provided with a comprehensive induction and a range of training to give them the skills and knowledge to provide people's support. Staff told us, "When I first started the training provided was really good, since then I have had more training for my new role. It is really interesting." Records we looked at confirmed this.

Staff continued to be supported to receive regular supervision and appraisal and attended regular staff meetings and provided with handovers where they were updated on people's care and support needs.



## Our findings

At our last inspection in March 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

People who used the service told us they liked the staff and they were kind. We observed staff were kind and caring in their approach and their interactions with people. We observed staff approach people and discuss with them their plans for the day and different activity options available. Staff were seen to listen to people's queries and respond to these patiently. People who used the service were seen to approach staff and the registered manager with confidence; they indicated when they wanted their company and when they wanted to be on their own and staff were seen to respect these choices.

Staff described in detail how they respected people's individuality and how they supported them to stay in touch with their friends and maintain their interests. For example, one person attended church and church social events in line with their expressed wishes.

Staff were mindful of respecting people's privacy and dignity. People looked well cared for and well presented in their appearance. Staff maintained people's confidentiality.

Staff demonstrated an understanding of discrimination or prejudice-free supports. They showed a positive regard for what was important and mattered to people. People were supported to live according to their wishes and values and had access to advocacy services. An advocate acts to speak on a person's behalf who may need support to make sure their views and wishes are known. People using the service told us staff sat and spoke to them about their care and what they wanted and supported them to achieve this.

Personalised programmes and flexible staffing arrangements supported people's independence. Staff had an excellent understanding of people as individuals, their personalities, qualities, attributes, how they communicated and expressed themselves, their strengths and areas they required support in.

A recent deterioration in one person's health had been quickly identified and referrals made to relevant professionals to identify the cause and ensure appropriate support was accessed.



## Our findings

At our last inspection in March 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

People using the service told us staff were responsive to their wishes. They said they made choices about their life including the activities they followed within their home and in the local community. They gave an example of going to garden centres, their local church café and other places of interest to them. During our inspection we saw people followed activities of their choice with support from staff.

Care plans were reviewed regularly to ensure that information remained current and provided up to date information for the staff team.

The registered manager was aware of the Accessible Information Standard and care plans contained information about the person's preferred method of communication. Details of whether the person could communicate their needs around requiring assistance or making decisions was also included. The Accessible Information Standard came into force in 2016 with the aim of ensuring people with disabilities, impairments or sensory loss get information they are able to understand, plus any communication support they need when receiving healthcare services.

Although people using the service were not approaching the end of their life, staff had a good understanding of what care and support people might need when this time came. An end of life care plan was in place for this with details of people's preferences, for example, one person wanted to be buried next to a family member and had purchased a burial plot.

People knew who they could talk to if they were unhappy. People using the service told us they could speak to the registered manager or staff about anything. One person told us, "I'd tell her the boss", pointing to the registered manager. Staff we spoke with told us they would be confident supporting people if they wished to raise a complaint.

The provider continued to have a procedure for receiving and responding to complaints about the service although no complaints had been received since our last inspection. Copies of this was available in an easy to read format within the service. Staff spoken with were fully aware of their responsibilities in dealing with complaints and bringing this information to the attention of senior staff and the registered manager.

Since the last inspection staff had continued to respond well to people's behavioural needs and care plans were based on a positive, proactive approach and best practice guidance.

## Our findings

At our last inspection in March 2016, we rated this key question 'Requires Improvement'. At this inspection the service has improved to 'Good'. The quality assurance system has been further developed and embedded into the practice of the service.

People using the service told us they enjoyed living at the service and were happy.

There was a registered manager in place. 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.

We saw people using the service knew the registered manager and was confident approaching them. Staff and people using the service told us they could speak to the registered manager, if they had any concerns or wanted any changes to their support. The registered manager had responsibility for another service. Senior carers worked at both services and shared some of the management responsibilities on a day to day basis for example, supervision for some staff and completing checks and audits of the environment.

The service was built around best practice in supporting people who have a learning disability or autism; including Registering the Right Support. The service consisted of two small bungalows for two people, one self-contained flat and a two-bedroomed house located nearby. All the people using the service were an active part of their local community.

The provider had systems to monitor the quality of the service. These included visits by the senior management team and quality assurance manager to assess the service. The registered manager was committed to providing a high-quality service to people. We saw the registered manager and staff within the service carried out checks and audits of the service to monitor good standards were being maintained. Medication, care records and the safety of the environment were checked to ensure people received safe care to meet their needs. Further feedback was obtained through surveys and residents and staff meetings.

The registered manager and staff in the service continued to work with local health and social care agencies to ensure people continued to receive the support they required as their needs changed.

Registered providers of health and social care services are required by law to notify us of significant events

that happen in their services such as allegations of abuse and authorisations to deprive people of their liberty. The registered manager ensured all notifications of significant events had been provided to us in a timely way.