

National Schizophrenia Fellowship Lindsay House

Inspection report

110-116 Lindsay Avenue
Abington
Northampton
Northamptonshire
NN3 2JS

Tel: 01604406350
Website: www.rethink.org

Date of inspection visit:
01 June 2017

Date of publication:
30 June 2017

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

Lindsay House is registered to provide a supported living service for people with a mental health diagnosis. The service can support 15 people who require personal care support; at the time of our inspection four people were using the service. At the last inspection, in May 2015, the service was rated Good. At this inspection we found that the service remained Good.

People continued to receive safe care. Staff were appropriately recruited and there were enough staff to provide care and support to meet people's needs. People were consistently protected from the risk of harm and received their prescribed medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision, training and on-going professional development that they required to carry out their roles. People were supported to maintain good health and nutrition.

People developed positive relationships with the staff; who were caring and treated people with respect, kindness and courtesy. People had detailed personalised plans of care in place to enable staff to provide consistent care and support in line with people's personal preferences. People knew how to raise a concern or make a complaint and the provider had effective systems in place to manage any complaints that they may receive.

The service had a positive ethos and an open culture. The registered manager and deputy manager were positive role models in the service. People and other professionals told us that they had confidence in the manager's ability to provide consistently high quality managerial oversight and leadership to the service.

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 remains good.

Lindsay House

Detailed findings

Background to this inspection

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

This was a comprehensive inspection that was completed by one inspector on 1 June 2017 and was unannounced.

Before the inspection, the provider completed 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. The provider returned the PIR and we took this into account when we made judgements in this report. We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. This included the local authority who commissioned services from the provider.

During our inspection we spoke with two people who used the service and four members of staff including the registered manager and deputy manager and two care staff. We looked at records and charts relating to three people and three staff recruitment records. We looked at other information related to the running of and the quality of the service. This included quality assurance audits, training information for care staff, staff duty rotas, meeting minutes and arrangements for managing complaints.

Is the service safe?

Our findings

People received care from a dedicated and caring team of staff. Recruitment processes ensured that staff were suitable for their role and staffing levels were responsive to people's needs. People told us that staff were available when they needed them and that they never had to wait to receive the support they needed. One person said "The staff respond quickly when I ask them to do things or ask them any questions; I'm never left waiting which would increase my anxiety." Our observations supported these views and we saw that staff responded to people's requests for care in a timely way.

Risks to people had been assessed and we saw that staff were vigilant and worked successfully to provide care and support in a way that kept people safe. The provider had a clear safeguarding procedure and staff were knowledgeable about the steps to take if they were concerned. One member of staff told us "I would raise any concerns with the manager or deputy or higher up in the organisation if I had to; I know they would get dealt with straight away but I also know the procedure to report concerns outside of the company." Safeguarding notifications had been raised when required and investigations had been completed in a timely manner.

We found the medicines management systems in place were clear and consistently followed. People told us they always received their medicines as prescribed. One person said "I have my medication in the clinic, it is private in there and I always like to have my medication spot on time and the staff don't let me down." Records relating to people supported to self-administer their medicines were regularly reviewed. The staff informed us in the event of any decline in a person's mental health condition; re-assessments were carried out to ensure the person could continue to self-administer their medicines safely.

Is the service effective?

Our findings

People received care from staff that were knowledgeable and had received the training and support they needed. Staff training was relevant to their role and equipped them with the skills they needed to care for people who they were supporting. For example, staff had received specialist mental health training and were supported by health professionals to put what they had learnt into practice. All staff had regular supervision and appraisal; one staff member said "My supervisor is great, I feel fully involved and part of the team and part of the decision making processes. We are informed of proposed changes and I always get a chance to discuss any issues or concerns that I may have."

People were encouraged to make decisions about their care and their day to day routines and preferences. Staff had a good understanding of people's rights regarding choice. Detailed assessments had been conducted to determine people's ability to make specific decisions and where appropriate best interest decisions had been made. One person said "The staff always ask me what my plans are for the day, whether I need any support and what activities I would like to be involved in, they never try to pressure me and if I feel like not doing much that is okay as well."

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. We checked whether the service was working within the principles of the MCA and we saw that they were.

People were supported to maintain a healthy balanced diet and those at risk of not eating and drinking enough received the support they required to maintain their nutritional intake. People had regular access to healthcare professionals. The staff were vigilant to any changes in people's health conditions and prompt and appropriate referrals were made to healthcare and social care professionals.

Is the service caring?

Our findings

People developed positive relationships with staff and were treated with compassion and respect. Feedback from healthcare professionals indicated they found the staff were competent and caring in the way they supported people using the service.

People were relaxed in the company of staff and clearly felt comfortable in their presence. We observed that staff knew people well and engaged people in meaningful conversation. People's choices in relation to their daily routines and activities were listened to; staff treated people as individuals, listened to them and respected their wishes. Staff were observed speaking to people in a kind manner and offering people choices in their daily lives, for example if they wanted any snacks and what support did they need to prepare and cook their evening meals.

People were treated with dignity and respect. We saw that people were asked discreetly if they required any support. One person told us "Some days I need more support than others, but I don't feel like I am bothering the staff." Staff were aware if people became anxious or unsettled and provided people with support in a dignified manner. Staff approached people calmly, made eye contact and had a positive approach to supporting people.

Is the service responsive?

Our findings

People received care that met their individual needs. A range of assessments had been completed for each person. People and where appropriate their relatives and other health and social care professionals were involved in developing their detailed care plans. Staff knew people very well; their backgrounds and what care and support they needed. One staff member said "We really take the time to get to know each person, to understand their life story; this really helps them to settle and feel at home here". One person said "The staff were great when I moved in, I spent some time visiting first to get used to the surroundings and it has been great since then."

People were supported to follow their interests and take part in social activities. For example one person told us about the arts and crafts they are supported to do. Another person told us about a various outings they had been on and other activities they had been involved in. We saw in a person's care plan they have a group music sessions on a weekly basis and also the opportunity to learn to play musical instruments. One person had written a song the music group were planning to perform at the next performance. As part of peoples mental health recovery goals were set and progress towards meeting those goals were continuously monitored.

There was information on advocacy services on notice boards for people to access and an independent advocacy service was due to commence supporting a tenants forum.

People and their relatives knew how to make a complaint and were confident that their concerns would be carefully considered. However no-one had needed to make a formal complaint. One person said "I've never really needed to make a complaint; if I am not happy with something I talk to the manager and she puts it right." We saw that there was a clear complaints policy in place. Records were maintained of all the issues that had been raised with the manager detailed the actions that had been taken.

Is the service well-led?

Our findings

People benefited from receiving care from a team of staff who were committed to providing the best possible care and support they could which was consistent and could be relied upon. People knew who the registered manager was and were confident to speak to them about their care and support needs. Staff told us they felt well supported and said that they would not hesitate to speak to the registered manager if they needed to.

Staff were focussed on the outcomes for the people that used the service and they worked well as a team to ensure that each person's needs were met. All of the staff we spoke with were committed to providing a high standard of personalised care, support and rehabilitation. One member of staff told us "This is a really good company to work for; we provide person-centred care, everyone is treated as an individual."

Staff felt listened to and were in regular contact with the management. Staff told us that they were involved with the development of people's care plans. The management team were receptive to staff ideas and suggestions and made the appropriate changes when necessary. Meetings were held with staff which enabled them to share good practice and keep up to date with any changes or developments within the company.

Quality assurance systems were in place to help drive improvements. These included a number of internal checks and audits as well as a provider audit. These helped to highlight areas where the service performed well and the areas that required development.

Systems were in place to encourage people, visitors and staff to provide feedback about the quality of care people received. In addition to the monthly meetings people had about their care, people were invited to tenants meetings to discuss general issues regarding the supported living environment. Annual satisfaction questionnaires were completed by people who used the service and their relatives if people consented to this. Feedback comments included "The staff give people choice and opportunity to improve their quality of life experiences while encouraging independence and self-responsibility." The provider also had a 'friends and family test' feedback card which people could complete about their experience of visiting the service. Comments included "Everyone is really friendly and helpful" and "Positive attitudes by all the staff" and "Staff always accommodate people's needs."

The service had good links with the community and a group of volunteers had decorated a communal lounge with the full input from the tenants and we saw that plans were in hand for a future project landscape an area of the garden.