

Autism Initiatives (UK)

Lethbridge Road

Inspection report

2 Lethbridge Road
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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

Lethbridge Road is a residential care home providing personal and nursing care to five people at the time of the inspection. The service can support up to six people.

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

The Secretary of State has asked the Care Quality Commission (CQC) to conduct a thematic review and to make recommendations about the use of restrictive interventions in settings that provide care for people with or who might have mental health problems, learning disabilities and/or autism. Thematic reviews look in-depth at specific issues concerning quality of care across the health and social care sectors. They expand our understanding of both good and poor practice and of the potential drivers of improvement.

As part of thematic review, we carried out a survey with the registered manager at this inspection. This considered whether the service used any restrictive intervention practices (restraint, seclusion and segregation) when supporting people.

The service used positive behaviour support principles to support people in the least restrictive way. No restrictive intervention practices were used.

Positive behaviour support plans were developed in line with current guidance and had resulted in people no longer require this type of support as they developed skills themselves to manage how they feel.

The service applied the principles of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support in the promotion of 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. Lethbridge Road is located in an area that enabled people using the service to participate in their own local community.

People were active each day and travelled independently on public transport to local places of interest and

shops and enjoyed day time activities, such as swimming. Social activities took place in local restaurants and pubs.

Risks that people faced had been assessed and those identified were safely managed. Medicines were managed safely. Staff showed a good understanding of their roles and responsibilities of keeping people safe from harm.

Staffing levels were appropriately managed and people received care from consistent, regular staff. Enough staff were employed each day to meet people's needs, keep them safe and give them the opportunity to take part in their chosen activity.

Staff received a range of training appropriate to their role and people's needs and were supported by the registered manager through regular supervision.

People were encouraged and supported to eat and drink well. People were given a choice of suitable meals and snacks. Staff supported people to make meals of their choice throughout the week. People were supported to access healthcare when needed.

People were offered choice and control and where able, consented to their care and support. Staff supported people to be as independent as possible with activities of daily living, such as laundry, cooking, shopping and personal care.

Effective systems were in place to check the quality and safety of the service. The environment was safe and in a good state of repair and decoration.

The leadership of the service promoted a positive culture that was person-centred and inclusive. The registered manager and the staff team showed a desire to improve on the service provided and in turn the quality of life experiences for the people at Lethbridge Road.

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 23 February 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?

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 ●

Lethbridge Road

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 team consisted of one inspector.

Service and service type

Lethbridge Road 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

We gave the service 48 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us and that the registered manager would be available to support the inspection.

What we did before 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. 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 used all of this information to plan our inspection.

During the inspection

During the inspection we spoke with the registered manager, deputy manager and 3 support workers. We looked at two people's care files, medicine administration processes, and other records relevant to the quality monitoring of the service.

We observed interactions between people and staff. We were part of people's conversations regarding their day time activities. We undertook general observations of the home over the course of the inspection, including the general environment, décor and furnishings and bedrooms of the people who lived at Lethbridge Road.

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.

Assessing risk, safety monitoring and management

- Individual risks to people had been assessed; risk assessments provided detailed information around people's individual risks in order for staff to keep people safe.
- Staff knew people's identified risks well and were able to support people in the home, during an activity and when out in the community in a safe way.
- Risks to people were regularly reviewed and records updated to reflect any changes in identified risks.
- Regular safety checks were completed on the environment and the equipment people used to ensure it remained safe.
- Personal Emergency Evacuation Plans (PEEPs) provided guidance for staff to safely evacuate people in an emergency.

Systems and processes to safeguard people from the risk of abuse

- Staff received safeguarding training and had access to relevant information and guidance about how to protect people from harm.

Staffing and recruitment

- Safe recruitment processes continued to be followed.
- The staff team at Lethbridge Road were experienced working with adults with autism; some had worked at the service for many years.
- Regular assistant support workers (ASWs) were used to cover additional shifts that could not be carried out by the permanent staff team.
- Staff worked to provide a safe environment and to support people on individual activities in the community. Rotas were seen to support this.

Using medicines safely

- Medicines were managed safely by appropriately trained staff. Medication was administered in conjunction with guidance and instructions; medication administration records (MARs) were appropriately completed.
- Guidance was in place for staff to safely administer 'as required' medicines to ensure people were only given medication when needed. Records were kept when this medication was administered and used to inform health care professionals who were involved with people living in the home.
- Routine medication audits were completed.

Preventing and controlling infection

- Staff received training around preventing and controlling the spread of infection and had access to relevant guidance and information about good infection prevention and control.
- All areas of the home were clean and well-maintained.

Learning lessons when things go wrong

- A record of incidents that occurred was kept and reviewed regularly with senior managers to identify any patterns or trends so that changes or improvements could be made or introduced to people's routines.

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 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

- Assessments of people's care and support needs were completed in good detail and provided guidance for staff to support people based on their needs and choices.
- Support plans identified goals and were reviewed regularly to identify ways to further develop people's independence.
- Staff knew people well and how to best meet their needs.

Staff support: induction, training, skills and experience

- Staff were seen to be competent, knowledgeable and skilled in their role and supported people effectively.
- Training was provided for staff throughout their employment to maintain up-to-date skills and knowledge.
- Additional training was provided to staff which was appropriate to the needs of the people living at the service.
- Staff received regular supervision.
- Staff told us they felt supported on a day to day basis by the senior staff.

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

- People were supported to maintain a healthy balanced diet and had access to regular food and drinks throughout the day.
- Staff were knowledgeable of people's individual dietary needs and preferences and meals and snacks were provided accordingly.

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

- The home was maintained to a good standard.
- People's bedrooms were furnished and decorated to suit their individual tastes and preferences.
- The décor of the communal areas and the furniture was chosen in line with people's choices, including a picture wall highlighting people's achievements.
- The registered manager said, "The home itself, is built to be a home not a service. We consult with people on its design and include as many photos, or important items in both their bedrooms and the communal areas to enable the environment to feel caring."

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

- People were supported to maintain good health. Regular appointments were made with the local

dentists, optician and health clinics.

- Documentation regarding health needs of each person was comprehensive and concise.
- Staff responded promptly to people's changing needs. Records showed staff had engaged well with health and social care professionals, to ensure that people's needs were met as effectively as possible.
- Staff worked to plan and support people moving from one setting to another, to enable an effective transition.
- People at the service were included and asked for their views and ideas when planning a persons move.
- A person living at Lethbridge Road was invited to be a part of training for medical staff for 'What hospital stays appointments can be like for people with autism.' With support from staff the person was supported to share experiences on hospital admissions and the impact a diagnosis of autism had on them.

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 .

- The service continued to work within the principles of the MCA.
- People were involved in decisions about their care.

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 received good care and support from staff who clearly knew them well.
- Staff demonstrated patience and kindness towards people, particularly when they needed advice and support.
- It was clear from observations that staff had developed strong relationships with people. Staff displayed positive, warm and familiar relationships and were seen to be genuinely kind and compassionate.
- People were supported to maintain relationships and spend time with their family members.

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

- People were supported to make decisions about their support and staff ensured people were provided with 'choice' on a day to day basis.
- Pictures boards were used to remind some people of their activities for a particular day as well as which staff were available to support them.
- Staff were familiar with the level of care and support people required as well as being familiar with their likes, dislikes and preferences.
- People had 'consultation meetings' with staff regularly to plan and make changes to their activity programme. However, suggestions made outside of these planned meetings were recorded to capture their suggestions and wishes.
- The registered manager had recently introduced new consultation books for daily use. They told us, "Since introducing these books we already have identified new holiday destinations, new things to buy. This grab book approach seems to be making the consultation process much more effective as it supports people to feel listened too as they can see the recording of the conversation."

Respecting and promoting people's privacy, dignity and independence

- Staff were observed being respectful towards people.
- Staff were aware when people became anxious throughout the day. Staff used appropriate distraction techniques and phrases to reassure people.
- Staff were observed giving people time to discuss what was making them anxious or upset.
- Locks were fitted to bedroom doors for people who were able to use them safely, to enable them to have some privacy in their bedrooms and keep their possessions secure.
- People were encouraged and supported to be as independent as possible both in the home and out in the community. Most people used public transport when accessing activities. People were supported by staff to

make meals and complete household tasks.

- Records relating to people's care were stored securely within the home.

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

- The care people received was person centred and based on their individual needs. Staff knew people's likes, dislikes and preferences and used this knowledge to care and support people in the way they wanted, such as, how they preferred to spend their time.
- Care records were detailed and contained relevant and up-to-date information regarding people's needs. The service ensured that all relevant records were completed in a timely manner when people's needs changed so that staff had access to the most up-to-date information.
- People were supported to access a range of activities in the community on a regular basis. Activities were planned around people's needs and preferences. These included visits to friends and family members.

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.

- The service continued to meet the communication needs of people with a disability or sensory loss in line with the Accessible Information Standards.
- People's communication needs were recorded.
- Information was produced in different formats to meet people's individual communication needs.

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 supported to take up hobbies, to attend their interests or attend day care activities.
- People in Lethbridge Road enjoyed a good community presence. They visited local pubs for social activities and restaurants for meals with friends. They used local leisure centres and libraries.

Improving care quality in response to complaints or concerns

- The registered provider had a complaints policy and procedure which was made available to people.
- No complaints had been made. People knew that the registered manager was the person to speak with if they had any problems or complaints.

End of life care and support

- The service was not supporting anyone with end of life care at the time of the inspection.

- Discussions had taken place with some people and their relatives and their wishes and preferences recorded.

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; 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 and staff promoted a culture of person-centred care by engaging with everyone using the service and family members.
- People received person centred and high-quality support.
- The registered manager attended practice forums, to keep up to date with current and new research and legislation. This enabled them to identify new and innovative strategies for supporting people.

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

- The registered manager understood their role and what was required to ensure the service provided good care to people.
- The provider understood their responsibilities; notifications had been submitted to CQC as required; the rating given for the last inspection was displayed in the service.
- Staff received supervision and support from the registered manager or senior staff to develop their practice.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service continued to involve people and family members in discussions about their care and support.
- People living at the service were involved in staff recruitment; where possible interviews were held at Lethbridge Road so people could meet the applicants and ask any questions they had.
- The registered manager and staff at Lethbridge Road worked closely with other agencies to achieve good outcomes for people. This included working with day services, commissioners and health and social care professionals.
- A healthcare professional told us, "The manager has been able to organise professionals' meetings on request within an acceptable timeframe. I have found that the manager has considered the safety and comfort of the other service users at this placement."
- People had developed strong links with their local community. People used social amenities in the local area and beyond regularly.

Continuous learning and improving care

- Quality assurance systems were in place and used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the management team and registered provider to identify areas of improvement.
- Regular handover and staff meetings provided opportunities to discuss current practice and support and any changes that were needed.
- Questionnaires were sent to family members twice a year to gather their opinions. Feedback we saw was positive. Comments included, "I would like to say a big thanks you to all the staff and managers for all the hard work everyone puts in to get [name] where he is today. Thank you for working with us", "All very satisfied with care", "Thanks to [staff] I now have peace of mind that [name] needs are being met. [Registered manager] understands him so well, along with the wonderful staff" and "Consistent staff team, all singing from the same sheet. No mixed messages".