

Vesta Care Limited

Silverdene Residential Home

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

Silverdene provides accommodation and personal care to adults with learning disabilities. This is provided in four areas of the home identified as the house, the new build, bungalow and the annex. In addition to those living there, they also provided respite services. At this inspection, they were supporting 16 people.

A registered manager was in post but owing to pre-arranged annual leave was not available at this inspection. We were supported throughout by the deputy manager and head of operational services. 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.

At the last inspection the service was rated good. At this inspection we found the service remained good.

People continued to remain safe as staff knew how to recognise and respond to concerns of ill-treatment and abuse. There were enough staff to support people to meet their needs. The provider followed safe recruitment procedures when employing new staff members.

People continued to receive care that was effective and personalised to their individual needs and preferences. They were assisted by a staff team who were well supported and had the skills and training to effectively support people.

People were supported to have choice and control over their lives and staff supported them in the least restrictive way possible. Staff were aware of current guidance which informed their practice and people's rights were protected by the staff who supported them.

People received support that continued to be caring and respectful. People were supported by a staff team that was compassionate, thoughtful and respectful.

People's privacy and dignity was respected by those providing assistance. People were supported at times of upset and distress.

People continued to be involved in developing their own care and support plans. When changes occurred in people's personal and medical circumstances, these plans were reviewed to reflect these changes. People's individual preferences were known by staff members who supported them as they wished. People and their relatives were encouraged to raise any concerns or complaints. The provider had systems in place to address any issues raised with them.

Silverdene continued to be well-led by a management team that people and staff found approachable and supportive. People were involved in decisions about their care and support and their suggestions were

valued by the provider. Staff members believed their opinions and ideas were listened to by the provider and, if appropriate, implemented. The provider had systems in place to monitor the quality of service they provided and where necessary made changes to drive improvements.

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 remains Good

Silverdene 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 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.

This inspection took place on 31 May and 1 June 2017 and was unannounced.

We reviewed information we held about the service. We looked at our own system to see if we had received any concerns or compliments about the provider. We analysed information on statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law.

We asked the local authority and Healthwatch for any information they had which would aid our inspection. We used this information as part of our planning.

We spoke with eight people receiving support, two relatives, five staff members, the deputy manager and head of operational services.

We looked at the care and support plans for two people including assessments of risk and guidance for the use of medicines. We looked at records of quality checks completed by the registered manager and the provider. In addition, we confirmed the recruitment details of two staff members.

Is the service safe?

Our findings

People continued to be protected from the risks of abuse and ill-treatment as staff knew how to recognise and respond to any concerns. People we spoke with told us they felt safe and protected by the staff that supported them. One person said, "I feel completely safe. I can talk about anything I feel unhappy about and staff will listen to me."

Staff members told us they had received training on how to identify and respond to any concerns of abuse or ill-treatment. Information was available to people, relatives and staff members on how to report any concerns that they had to the registered manager or the local authority. We saw that the registered manager and provider had made appropriate notifications to the local authority in order to keep people safe.

People told us they were safely supported to live at Silverdene. This was because risks from equipment and the environment were assessed and actions taken to minimise the potential for harm. One person said, "When using the hoist, they (staff) know how to do this safely. I have full confidence in them." People had individual assessments of risk which included potential dangers in their own homes and in the community. These assessments informed staff members how to safely support people.

Any incidents or accidents were reported by staff members and monitored by the registered manager and the provider. This was to identify any trends or patterns which required further action.

People told us, and we saw, that there were enough staff to support them safely and to assist them to do what they wanted. The provider followed safe recruitment procedures when employing new staff members. These checks included obtaining references and checks with the Disclosure and Barring Service (DBS). The (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with others.

People received their medicines when they needed them and were supported by staff who were competent to do so. One person told us, "I know what medicines I need to keep well. I get them when I need them because I know I will get poorly if I don't." The provider had appropriate guidelines and policies in place to safely support people with the medicines they needed to keep healthy.

Is the service effective?

Our findings

People told us they continued to be supported by staff who had the knowledge and skills to effectively meet their needs. One relative said, "All the staff are well trained and skilled in what they do." Staff members we spoke with felt they were provided with the opportunities to expand on their skills with training relevant to their role. One staff member said, "I have been placed onto a further qualification to increase my knowledge of care."

New staff members were supported to complete the Care Certificate. The Care Certificate is a nationally recognised training programme aimed at training staff to recognise the standards of care required of them. New staff also worked alongside existing staff members so they could get to know people and to see how they liked to be supported.

People were supported to have choice and control over their lives and staff supported them in the least restrictive way possible; the policies and systems at Silverdene supported this practice. When someone could not make decisions for themselves, the provider and staff knew what to do in order to protect the individual's rights.

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 Mental Capacity Act. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The provider had made appropriate applications but the decisions regarding these applications were still pending at this inspection.

People were supported to have enough to eat and drink to maintain their well-being. People told us they were supported to make healthy-eating decisions. One person told us "I get something different if I don't like what is offered." We saw people making decisions about what they wanted to eat or drink. People's cultural needs were catered for by staff who were aware of and supported people's beliefs.

People had access to healthcare services when they needed it. These included foot health, GP, district nurses and opticians. The provider referred people for healthcare assessment promptly if required.

Is the service caring?

Our findings

People continued to be supported by staff they described as, "lovely", "fun" and "fantastic." One relative told us, "I could not have wished for a better team of people to look after [relative's name]. They are just great and have made such an improvement in their life." Staff members spoke about those they supported with warmth and fondness.

People were supported in their religious beliefs with attendance at places of worship and observance of religious festivals. Family member's guidance and support was encouraged in assisting people to respect their faith and increase staff knowledge on how to assist them.

We saw people receiving support from staff members when they started to become upset and anxious. Staff members took the time to sit and listen to how people felt and allowed them the opportunity to express themselves.

People told us they were involved in making decisions about their care. This included how they wanted to be supported, by whom and at what time they wanted assistance. One person said, "I know I can let them (staff) know how I want things. It's just up to me to say."

People's privacy and dignity was respected by those supporting them. People told us staff always asked their permission before doing anything to support them. They went on to say that staff knocked and announced themselves when entering their rooms.

People were encouraged to do what they could for themselves and staff members assisted where needed. We saw people engaged in household tasks and involved in their own home. One person told us about the jobs they did throughout their home which gave them a sense of value and involvement.

Information which was confidential to the individual was kept securely and only accessed by those with authority to do so. We saw staff members confirming people's authority to access confidential information.

Is the service responsive?

Our findings

People told us they were still involved in the creation and development of their own care and support plans. We saw these plans gave the staff information on how they wanted to be assisted. One person said, "They [deputy manager's name] came out a couple of time to see me. We went through what help I needed and how they could support me. It gave me great confidence in them before I came here. I know I can change things if I want."

People told us they felt the care and support they received reflected their personal needs and wishes. Staff we spoke with could tell us about those they supported which included personal histories and things that were important to people.

People regularly reviewed their care and support plans with the staff members assisting them. We saw that following advice from the speech and language therapist one person's care and support plan had been updated. This included factual information regarding the changes needed to support them in a way that supported well-being. Staff we spoke with were aware of these changes and how to support them.

People were engaged in a range of activities which they told us they found fun, interesting and stimulating. At this inspection, we saw people were engaged in activities which included, shopping, household tasks, lunch out and walks. People were also involved in work experience placements. This provided people with the opportunity to develop skills in catering and customer services.

People told us they knew how to raise a complaint or a concern if they needed to do so. One relative said, "If it's not broke why fix it. I would have no problem raising a concern with [registered manager's name or deputy manager's name] at any time. I know they will respond to me positively." The registered manager and the provider had systems in place to investigate and respond to any concerns raised with them. This included investigation and feedback to the person when necessary. People were confident they would be listened to and their concerns addressed.

Is the service well-led?

Our findings

People and relatives we spoke with told us they knew who the registered manager and providers were, and that they saw them regularly. Staff we spoke with told us they could approach the management team at any time they needed, and felt they would be fully supported.

People were involved in the service they received and contributed to decisions regarding their own home environment. We saw people talking about the recent development of a sensory room and what they wanted included. People also told us they were involved in regular house meetings where they could talk about where they lived and things that mattered to them.

People and staff members received updates and communications from the providers which included a newsletter. These informed people and staff about changes which included the provision of additional services in the local area. However, these newsletters were sporadic and the head of operational services told us they were looking to make them more frequent. This was so people had greater access to information about the service they received.

We asked staff about the values they followed when assisting those living or staying at Silverdene. Staff members told us they supported people in a way that they wanted which built trust and respect between them. People we spoke with told us they felt valued by staff members who respected their personal decisions.

Staff members understood the policies and procedures that informed their practice including the whistleblowing policy. They were confident they would be supported by the provider should they ever need to raise such a concern.

The registered manager and the provider undertook regular checks to drive quality. These included regular checks on the environment in which people lived and the support they received. Following checks on the environment they identified that refurbishment was needed to one bathroom area. They raised this with the provider and we saw details that the work was planned in the near future. However, this work needed to account for the potential disruption to people living at Silverdene.

A registered manager was in post but not present at this inspection. The deputy manager and the head of operational services understood the requirements of registration with the Care Quality Commission. The provider had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale.