

Keelex 176 Limited

Station Villa

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

We inspected Station Villa on the 17 August 2017, the inspection was unannounced. Station Villa is one of a number of services in Cornwall which are run by the provider, Keelex 176 Limited. Station Villa provides accommodation for up to 16 people who have a learning disability. At the time of the inspection thirteen people were living at the service.

At the last inspection, in September 2016, the service was rated Good. At this inspection we found the service remained Good.

A registered manager had recently been appointed to the company who oversaw the day to day operations of Station Villa plus its other residential services. People, relatives and staff spoke very highly of the changes that the new manager had put in place at Station Villa, and the high level of support that they felt they received from them. One person said "I like her, it's so much better here now" and a member of staff said "She has opened my eyes to a new way of working. It is more person centred. They [people we support] really are at the centre in everything we now do."

The registered manager had a clear vision for the service and encouraged people, relatives and staff to express their views and opinions. The manager led by example and expected all the staff to carry out their role to the same standard.

People told us they felt safe living at Station Villa and with the staff who supported them. People told us, "I like it here" and "I am really happy." Relatives told us they were, "Very happy" with the care provided and the support they received from staff and the management team of Station Villa.

We observed people had good relationships with staff and staff interacted with people in a kind and respectful manner. People told us they felt staff were "great" and "helpful." The staff team had developed caring and supportive relationships with people using the service. A relative commented "[person's name] is treated kindly and [their] dignity is respected" and that staff "Go that extra mile." People were supported to maintain contact with friends and family and had the opportunity to be involved in decisions about their care and the running of the service.

Care and support was provided by a consistent staff team, who knew people well and understood their needs. People had dedicated key workers who were responsible for updating care plans and leading on supporting people. These were chosen according to their experience and relationship with the person concerned.

A visiting health and social care professional was positive about the care and support that people received at Station Villa. They told us that it was "Very person centred, the best it's been." They also commented that the staff team were encouraging people to develop their daily living skills so that people could become more independent and be proud of their own skills and abilities.

People told us that staff were very supportive and were fully involved in every aspect of their life, both in Station Villa and in the community. People told us they had set goals of things that they would like to achieve. Some examples were; going to the shop unsupported, undertaking educational courses, attending a music concert in London, or going on holiday. People told us, and showed us photographs of when they had achieved some of these goals and were proud of their accomplishments. This showed that people were fully involved in setting their own goals, and were supported to, where possible, work towards achieving them.

There were sufficient numbers of suitably qualified staff on duty and staffing levels were adjusted to meet people's changing needs and wishes. Staff completed a thorough recruitment process to ensure they had the appropriate skills and knowledge. Staff knew how to recognise and report the signs of abuse. Staff were supported through a system of induction and training. Staff told us the training was thorough and gave them confidence to carry out their role effectively. New employees undertook a rigorous induction programme and told us this was beneficial and prepared them well for their roles.

People were supported to eat and drink enough and maintain a balanced diet and were involved in meal planning. Menu planning was done in a way which combined healthy eating with the choices people made about their food.

People were supported to maintain good health, have access to healthcare services and receive on-going healthcare support. Staff supported people to arrange and attend appointments to see their GP and other necessary healthcare appointments.

Care records were up to date, had been regularly reviewed, and accurately reflected people's care and support needs. People, who received care, or their advocates, were involved in decisions about their support and consented to the care provided. Risk assessment procedures were designed to enable people to take risks while providing appropriate protection.

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

People and their families were given information about how to complain. The registered manager was visible in the service, regularly working alongside staff to provide care and support for people. There was a positive culture within the staff team and staff said they were supported by the registered manager.

There were effective quality assurance systems in place to make sure that any areas for improvement were identified and addressed. People and their families were involved in the running of the service and were regularly asked for their views through on-going conversations with staff and surveys.

Further information can be found 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

Station Villa

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. This unannounced inspection took place on 17 August 2017. The inspection was conducted by one adult social care inspector.

We reviewed the Provider Information Record (PIR) before the inspection. The PIR is a form that asks the provider to give some key information about the service, what the service does well and the improvements they plan to make. We also reviewed other information we held about the service and notifications we had received. A notification is information about important events which the service is required to send us by law.

During the inspection we spoke with five people living at the service, the registered manager, deputy manager and five care staff. We also spoke with a visiting health and social care professional. We looked around the premises and observed care practices on the day of our visit.

We looked at two records relating to people's individual care. We also looked at three staff recruitment files, staff duty rotas, staff training records and records relating to the running of the service. After the inspection we spoke with one relative.

Is the service safe?

Our findings

People told us they felt safe living at Station Villa and with the staff who supported them. People told us, "I like it here" and "I am really happy." A relative told us "It has been [person's name] home for more than half her life and she feels safe and secure" and "It is a great comfort to me that she is happy, safe and cared for at Station Villa."

People were protected from the risk of abuse because staff had received training to help them identify possible signs of mistreatment and know what action they should take. Staff told us if they had any concerns they would report them to management and were confident they would be followed up appropriately. Prior to this inspection staff had reported to the registered manager a safeguarding concern. This was then investigated by the provider with the involvement of the safeguarding team and the Care Quality Commission. This showed that staff were confident to raise issues of care practice to ensure that people were being cared for safely.

There were effective systems in place to support people to manage their finances. Some people living at the service managed their own money with support from the registered manager. Advocates were appointed for some people and appropriate arrangements had been put in place to formalise this. The service held small amounts of money for people so that they were able to make purchases for personal items and pay for outings. The procedure for overseeing people's monies had recently been reviewed. A more robust auditing system was now in place to ensure that people's monies were effectively monitored and kept secure.

Care records included risk assessments which provided staff with clear guidance and direction on how people should be supported in relation to each specific identified risk. People were supported to understand the risks in their daily living and agree ways of minimising risks without compromising their independence. For example, some people went out independently and the service regularly discussed any potential risks with each person and agreed with them how they should protect themselves from harm. The service had developed a 'yellow card' to support people to build their confidence to access the community independently. The person could show this to people if they needed assistance as the card informed the public that the person 'may not be able to communicate their needs in a way which is understood.' It gave the phone details of the service so that they could contact them on their behalf. Several people now carried the cards and the service had worked with people to identify 'safe places' in the event of an emergency.

Some people could become anxious or distressed which could lead to them presenting behaviour which could challenge others. Staff were made aware through the person's care plan, how to recognise signs that could make a person anxious and take steps to avoid them becoming distressed. This would then ensure staff would be able to support people effectively when they became distressed. In addition staff also carried a 'yellow card' which they could show to members of the public if a person became anxious. The card was designed to provide reassurance, understanding and also to minimise the intervention of well-meaning members of the community so that staff could continue to offer the most appropriate support to the person.

New staff completed a thorough recruitment process to ensure they had the appropriate skills and knowledge required to provide care to meet people's needs. There were enough skilled and experienced staff on duty to ensure the safety of people who lived at Station Villa was maintained. The number of staff on duty depended on which activities people living at the service were undertaking. The numbers of staff allocated for these activities was appropriate for people's needs and the assessed risks of the activity.

Incidents and accidents were recorded and appropriate action had been taken to manage areas of increased risk.

Medicines had been checked on receipt into the service, given as prescribed and stored and disposed of correctly. Where staff had handwritten the medicine chart, it was not always witnessed by another member of staff. This is known as transcribing which ensures that the medication, its dosage and time of administration has been written correctly and checked by another member of staff to prevent potential medicine errors.

From reviewing the Medicines Administration Record (MAR) charts and the blister pack that contained the medicines, we found that the medicines in stock tallied with the MAR records. However we noted in one case that a tablet had been taken from the incorrect blister pack. The registered manager reassured us that these issues would be addressed immediately.

Some people managed their own medicines and they had been provided with a secure method for storing them. There was clear guidance for staff when administering 'as required' medicines (PRN). For example, we saw descriptions of the signs and symptoms the person may display that may require these medicines to be administered. There was guidance on how to administer the medicines and who to inform. This meant there was clear guidance to help ensure a consistent approach from the staff team.

The environment was clean. A maintenance record was kept of any repairs needed and when they were completed. There was a system of health and safety risk assessment and smoke detectors and fire extinguishers were fitted throughout the premises. Fire alarms and evacuation procedures were checked by staff, the fire authority and external contractors to ensure they worked.

Is the service effective?

Our findings

People received effective care because they were supported by a staff team that were trained and had a good understanding of people's needs and wishes. Staff spoke knowledgeably about the people living at the service and knew how to meet each individual's needs. People had allocated key workers who worked closely with them to help ensure they received consistent care and support.

When new staff were employed by the service they completed a full induction programme which included shadowing experienced staff and getting to know the people living at the service. The induction was in line with the care certificate which gives care staff who are new to working in care, an understanding of good working practices. A newly recruited member of staff told us, "I had a good induction, two weeks at the main office and then came here to shadow staff. It really helped me understand my job and get to know the residents."

Staff told us they felt supported by the management and they received regular one-to-one supervision. This gave staff the opportunity to discuss working practices and identify any training or support needs. Staff told us they were encouraged by the registered manager to further develop their training. Staff also said that there were regular staff meetings which gave them the chance to meet together as a staff team and discuss people's needs and any new developments for the service.

Training identified as necessary for the service was updated regularly. Staff told us the training was comprehensive. Staff had the knowledge and skills necessary to carry out their roles and responsibilities effectively. The training records for the service showed staff received regular training in areas essential to the service such as fire safety, infection control and moving and handling. Further training in areas specific to the needs of the people using the service was provided. For example end of life training was provided when the service was supporting a terminally ill person at Station Villa. This showed staff had the training and support they required to help ensure they were able to meet people's current needs.

People were supported to maintain good health, have access to healthcare services and receive on-going healthcare support. People's care plans contained details regarding other health professionals and their contact details as well as easy read, health action plans which outlined what support people needed in an accessible format. Staff supported people to arrange and attend appointments to see their GP and other necessary healthcare appointments. Relatives told us they were made aware of their family member's medical appointments and any changes to their health.

People were supported to eat and drink enough and maintain a balanced diet. A weekly menu was in place and this was agreed with people at regular menu planning meetings. Menu planning was done in a way which combined healthy eating with the choices people made about their food. We also saw people being offered a choice of lunchtime meals and drinks and snacks were available throughout the inspection. People offered and made drinks for other people, staff and visitors and were provided with staff support if needed. Staff prepared the main meals for people. Some people helped in the preparation of their meals and they were supported by staff to do this.

The registered manager and staff had a clear understanding of the Mental Capacity Act 2005 (MCA) and associated Deprivation of Liberty Safeguards (DoLS). 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. The application 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.

Staff applied the principles of the MCA in the way they cared for people and told us they always assumed people had mental capacity to make their own decisions. Care records detailed whether or not people had the capacity to make specific decisions about their care. Records showed where decisions had been made, on a person's behalf, this had been done in their best interest at a meeting involving key professionals and their family. We observed throughout the inspection that staff asked for people's consent before assisting them with any care or support. People made their own decisions about how they wanted to live their life and spend their time.

Is the service caring?

Our findings

There was a relaxed, calm and friendly atmosphere at the service. We observed people had good relationships with staff and staff interacted with people in a kind and respectful manner. The staff team had developed caring and supportive relationships with people using the service. People told us they felt staff were "great" and "helpful." We saw people return to Station Villa from their day activities and greet staff with a smile, hug and a kiss, and this was responded to by staff appropriately. We heard laughter and appropriate banter between people and staff which evidenced that people appeared relaxed in their home.

A relative commented "[person's name] is treated kindly and her dignity is respected" and that staff "Go that extra mile." They explained that as they were no longer able to travel to meet their family member for a home visit, that staff now supported the person to catch a train and travelled with them to enable the home visit to occur. The person then stayed with them for a period of time and staff then travelled to meet the person so that they could support them on their return journey to Station Villa.

The relative also felt that staff had developed a positive relationship with their family members but also with them. Relatives were highly complementary about the availability of staff to answer any questions they may have, and that they would be able to answer their queries as they knew the people they supported so well.

Staff were committed to providing the best and most suitable support for people. They did not rush people, were focused on the person they were supporting and spent time on an individual basis with people. Staff spoke about the people they supported fondly. One staff member commented "They are my family." There had been a recent bereavement at the service and staff, and people spoke to us about this. The registered manager told us 'Quite remarkably, [staff members name] – a long standing carer in the home, who supported [person's name] on the very first day he moved into Station Villa over thirty years ago and had been his keyworker throughout the length of his residence was with [person's name] as he passed away. Ensuring [person's name] was pain-free, comfortable and passed away with dignity in the company of staff who knew him was not only a priority for the staff team at Station Villa, but is also the single proudest achievement I so far have of the team at Station Villa in my short-time as manager. Following his death, Station Villa was offered as the natural venue for [person's name] wake and staff from the home supported [person's name] family in funeral planning and providing support to them in their loss.' We saw a compliment letter from the family who stated, 'You have all given your all to care for [person's name] against all the odds, you have done this with compassion and love and in the end achieved his wishes in a peaceful and dignified manner. You need to feel proud of yourselves as I am of you.'

Staff maintained people's privacy and dignity throughout our visit. For example, we saw staff knocked on people's bedroom doors before entering and addressed people by their preferred name. Staff told us they had opportunity to have one to one time with people. We saw staff having individual time with people and joining people for lunch and a drink in the dining room. This was also recorded in the person's care notes. This demonstrated that staff took time to listen to people.

People's care plans recorded their choices and preferred routines for assistance with their personal care and daily living. Staff encouraged people to make decisions about their daily routines and we observed that

people had the confidence to make their own choices. People moved freely around the premises choosing to spend time in the lounge, dining room or their own room. Staff supported people to be involved in some household tasks such as cleaning and tidying their rooms and meal preparation. On the day of the inspection one person helped staff to review the shopping list and another person made drinks for people, staff and visitors. This meant people were able to maintain independence in their daily living.

People had a key to their bedroom so that their belongings were kept secure. They told us they chose the décor and the furniture. People said they were happy with their bedroom which was personalised to reflect their taste. One person told us they were involved in meetings with a kitchen designer, as it was going to be refurbished and showed us the drawings. This showed that people were fully involved in decisions around their surroundings as well as their care. This showed people were being respected as staff saw Station Villa as the person's own home.

People's care plans showed that people's preferred communication skills were identified and respected. For example, some people responded verbally and others also used picture symbols as a visual tool to assist them in understanding what activity they would undertake next. We saw pictures and photographs were used to help people make choices and supplement information, for example within care documentation. Staff were aware that each person had their own way of expressing their views and were able to communicate with them in their preferred manner. This showed that the service shared information with people in a meaningful way.

The registered manager had supported some people to access advocacy services when they needed independent guidance and support. This helped ensure people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

Is the service responsive?

Our findings

People told us that staff were very supportive and were fully involved in every aspect of their life, both in Station villa and in the community. People told us they had set goals of things that they would like to achieve. This was recorded in people's care records, alongside what steps were needed to ensure that their goal would be achieved. Some examples were; going to the shop unsupported, undertaking educational courses to improve a person's numeracy and literacy so that they could now write their own name and had improved their reading level, attending a music concert in London and going on holiday. People told us, and showed us photographs of when they had achieved some of these goals. These photographs were displayed on a wall in the dining room, so that they could remember their trips and be proud of their accomplishments. People spoke to us enthusiastically when telling us the stories behind the photographs. This showed that people were fully involved in setting their own goals, and were supported to, where possible, work towards achieving them and the confidence and pride for people's accomplishment was evident.

People received care and support that was responsive to their needs because staff had been provided with detailed information about each person's individual needs. Staff spoke knowledgeably about how people liked to be supported and what was important to them. The registered manager and staff told us about people's backgrounds and described the progress they had made and the pride they took in their achievements. This enabled staff to gain an understanding of what had made people who they were today and the events in their past that had impacted on them.

In addition along with the person, staff had summarised what was important to the person by compiling a one page profile which outlined the persons likes and dislikes, preferences, what others liked about the person and what was important to and for the person. The staff also developed a one page profile to share with people about their interests and where their skills were. For example, if a person and staff member had a common interest they would become their allocated keyworker, supporting the person to organise their daily living and update their care plan.

We looked at a person's care records with the person. They told us the care records accurately reflected the way they needed support. Care records were up to date, had been regularly reviewed and accurately reflected people's care and support needs. Details of how people wished to be supported with their care needs were personalised to the individual and provided clear information to enable staff to provide appropriate and effective support.

A relative commented "I have a good relationship with the staff and they are very good about ringing me if they have a concern about [person's name] and involving me in [their] reviews. This is very important as I now live so far away. I am able to speak to [person's name] by telephone on a weekly basis and [they] tells me all [their] news."

The registered and deputy manager told us that they had recently supported a person to move from Station Villa to independent living in the local community. They worked with the person to build their confidence in

their living skills and supported the person as they looked at supportive living options available to them. For a four-week period prior to the person's move, they were supported by staff to regularly visit their new placement and for four weeks following their move from Station Villa staff continued to provide support to the person and their new placement provider, to ensure a smooth transition and the best possible outcome for the person. This demonstrated that staff worked with a person to further develop their independent living skills so that they could live and be supported in the local community.

A visiting health and social care professional was positive about the care and support that people received at Station Villa. They told us that it was "Very person centred, the best it's been." They also commented that the staff team were encouraging people to develop their daily living skills so that people could become more independent and be proud of their own skills and abilities. They felt that the staff responded to incidents promptly so that they could reassess and review a person's care quickly to ensure that it continued to meet the person's needs.

When a new shift started there was a verbal handover of care information and daily logs of people's activity were completed throughout the day. We attended a handover meeting and saw that any changes in people's needs, as well as information regarding activities and people's emotional well-being was discussed. Daily logs were audited to identify any emerging themes. A communication book was also used to record any general information which needed to be shared amongst the staff team. This meant that there was good communication between staff to ensure people were supported in a consistent way.

People and their families were given information about how to complain and details of the complaints procedure was displayed in the service. An easy read version was also available for people which used written and pictorial symbols so that it was presented in a more meaningful way for them. People told us that if they had any 'worries' they would talk to the registered manager or staff. They felt the registered manager and staff listened to them and would respond to their concerns. Relatives told us they knew how to raise a concern and said they would be comfortable doing so because the management and staff were very approachable.

Is the service well-led?

Our findings

The registered manager commenced their post in April 2017. They were responsible for the day-to-day running of the service. 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 and associated Regulations about how the service is run.

The registered manager shared responsibility with another care service and divided their time equally between the two care services. The deputy manager worked in the service every day providing care and supporting staff. The deputy manager and senior carers were accessible to staff at all times which included one of them always being available on call to support the service. Staff said they believed the managers were aware of what happened at the service on a day to day basis in respect of the people they supported.

One of the senior carer's responsibilities was to organise the shift plan for the day to ensure that people's care needs, and the daily tasks in the service such as preparing meals and fire tests were allocated to staff members and completed. We saw the shift plan and noted that these were completed daily and any actions that needed to be followed up were handed over to the next shift. This meant that there were clearly defined expectations for staff to ensure that they met the needs of the service during their shift.

The registered manager acknowledged that there had been some staff turnover and they were still recruiting. People told us they were involved in the recruitment process. When new staff were recruited the registered manager worked closely with them to help ensure they adopted and understood the culture and ethos of the service. There was a positive culture within the staff team with an emphasis on providing a good service for people. Staff told us morale was good and staff worked well together as a team. Staff said they felt supported by the management commenting, "She has opened my eyes to a new way of working. It is more person-centred. They [people we support] really are at the centre in everything we now do" and "I love working here."

There were effective quality assurance systems in place to make sure that any areas for improvement were identified and addressed. There was a robust auditing system in place to ensure that the service provided quality care to the people they supported. For example we saw audits in the areas of care plans, fire, cleaning, complaints and accident records. The registered manager worked alongside staff to monitor the quality of the care provided by staff. The registered manager told us that if they had any concerns about individual staff's practice they would address this through additional supervision and training.

There was an open culture where staff were encouraged to make suggestions about how improvements could be made to the quality of care and support offered to people. Staff meetings were held to discuss each person's needs and support the staff team when the care provided for some people could be challenging. Staff told us the meetings were a good opportunity to discuss care practice and any other issues in the service.

People and their families were involved in decisions about the running of the service, as well as their care, through on-going conversations with staff and management. People told us they attended residents meetings where they were encouraged to share their views about the running of the service. People also had meetings with their keyworker which were an opportunity to review care plans and discuss if there were any elements of people's care or the service that they wanted to improve or develop. We saw pictorial surveys completed by people who used the service to show their level of satisfaction with the service provided at Station Villa. Relatives told us they were, "Very happy" with the care provided and the support they received from staff and the management team of Station Villa.

The service gave out questionnaires regularly to people, their families and health and social care professionals to ask for their views of the service. We looked at the results of the most recent surveys. Where suggestions for improvements to the service had been made the registered manager had taken these comments on board and made the appropriate changes.