

Bos Y'n Dre

# Bos Y'n Dre

## 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 

### Overall summary

We carried out a comprehensive inspection of Bos Y'n Dre on 14 September 2015. This was an announced inspection. We told the provider two days before our inspection visit that we would be coming. This was because we wanted to make sure people would be at home to speak with us. The service was last inspected in December 2013. The service was meeting regulation requirements at that time.

Bos Y'n Dre provides care and accommodation for up to four people who have a learning disability. Four people were living at the service during this inspection visit.

The service is situated close to the centre of St Austell with access to a public transport network as well as the

services own transport. The service is a two storey house of a domestic nature with no requirements for aids and adaptations, as people living there did not require support with their mobility.

The service had 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.

# Summary of findings

The registered providers also worked and managed the service. There were no additional staff members employed at Bos Y'n Dre. At some points in this report the registered providers and registered manager will be referred to as staff.

Care records were detailed and contained specific information to guide staff who were supporting people. Life history profiles about each person were in place. They provided information about the person, including life events which influenced their development and determine who they were today. Local authority care plan reviews were in pictorial format including large print. This meant staff were able to use them as communication tools. However the services own care planning documents were not in a format which people using the service might be able to understand.

People had access to a range of healthcare professionals as seen in review reports. When health visits had taken place they were recorded on the person's daily diary log. This information was collective about other daily activities and may not be easily identifiable.

People were supported to manage their individual finances to maintain a level of independence. People were supported to withdraw money when they wanted to and retain their own bank statements. The registered manager was looking at introducing a system to record when cash purchases had been made, and retaining receipts to ensure there was a clear audit.

Staff were very familiar with what support and care people needed. People were supported to lead full and

varied lives and staff supported them to engage in a wide variety of activities. For example attending day care and work placements, going out into the community independently and engaging with family. One person had recently re-established a family connection with the support of the registered manager. One person told us, "I like living here. I do lots of things. Yes I do feel safe". Records showed people were involved in their care planning and reviews.

Medicines were administered as prescribed and at the times required. Record were accurate and medicines were securely stored.

The service was meeting the requirements of the Mental Capacity Act (2005) and the associated Deprivation of Liberty Safeguards.

People had a choice of meals, snacks and drinks, which they told us they enjoyed. There was flexibility in what people might want to eat. One person told us, "I like the food. I am having egg on toast tonight". Weekly meetings took place with people using the service to decide what meals they would like. Two food deliveries' a week gave people the flexibility to make their choice or change if they wanted to.

Bos Y'n Dre was well-led and people's relatives told us they were kept informed about any changes in the service. They told us they felt their comments were listened to and acted upon. The service had an open and positive culture with a clear focus on enabling and supporting people to become more independent.

# Summary of findings

## 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 mainly safe. People were encouraged and supported to manage their own finances. However, to minimise risk a more robust system was being put in place for reporting cash purchases with receipts.

Procedures were in place to protect people from abuse and unsafe care.

Levels of support met the care needs of the people that lived at the service.

Good



### Is the service effective?

The service was effective. People had access to healthcare professionals.

People's choices were respected and staff understood the requirements of the Mental Capacity Act 2005.

People received a choice of suitable and nutritious meals and drinks in sufficient quantities to meet their needs.

Good



### Is the service caring?

The service was caring. People were treated with respect and their independence, privacy and dignity were promoted.

People and their families were included in making decisions about their care.

The registered manager spoke about people fondly and demonstrated a good knowledge of people's needs.

Good



### Is the service responsive?

The service was mainly responsive. Care plans were detailed, informative and regularly updated. However they were not all in a format which would aid communication for people with a learning disability.

People were supported to engage with the local community and to access a variety of recreational activities and employment.

There was a system to receive and handle complaints or concerns.

Good



### Is the service well-led?

The service was well led. There was an open and relaxed atmosphere at the service.

There was a system of quality assurance checks in place. People and their relatives were regularly consulted about how the service was run.

The registered provider routinely worked in the service and dealt with any issues of quality quickly and appropriately.

Good



# Bos Y'n Dre

## 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 inspection took place on 14 September 2015 and was announced. The inspection was carried out by one inspector. Before the inspection we reviewed previous inspection reports and other information we held about the service including notifications. A notification is information about important events which the service is required to send to us by law.

Two people were not available at the service during the inspection visit. One person had limited verbal communication, but we were able to verbally communicate with one person who lived at the service in order to find out their experience of the care and support they received. We spoke with the registered manager. There were no other staff employed at the service.

We looked around the premises and observed how staff interacted with people during the inspection visit. We also looked at four people's care records, medicine records and other records associated with the management of the service including surveys and audits.

Prior to and following the inspection visit we contacted a commissioner of services, four social workers and two relatives.

# Is the service safe?

## Our findings

Relatives told us they were very happy with the care and support the service provided. They said, “Very good service. Very happy with it”. Also, “Visited a number of times and it is very homely. They (service users) live as part of a family. It works well”. People using the service had limited communication. We observed they were comfortable and safe in the service environment. Professionals who worked with the service commented that it provided a ‘very good service’.

The service promoted people's independence by supporting them to manage their own finances. People had their own bank accounts and bank cards. The registered manager did not hold cash on behalf of people. However the registered manager was introducing a system to record when cash purchases were made and retain receipts to verify purchases. This would make a safer more robust system for the protection of people's monies.

Two of the four people living at Bos Y'n Dre were available to speak with, however both had limited verbal communication; therefore we spent time observing how people spent their time. People were relaxed and at ease in each other's company. Most people had lived together at the service for many years. When asked one person told us they felt safe. People interacted well with the registered manager who clearly recognised the level of support they needed.

There had been no safeguarding alerts made to the local authority or referred to the Care Quality Commission (CQC) about poor care or abusive practices when we undertook this inspection. The service had a safeguarding policy and

procedure in place if abuse were to be suspected. This had recently been updated following current good practice guidance. The registered manager was aware of the procedures to take should abuse be suspected.

Staff supported people to take day to day risks while keeping them safe. We saw care plans contained risk assessments which were specific to the needs of the individual. For example we saw assessments had been completed regarding one person's safety in the community. This was specific to road safety and their general vulnerability to keep the person safe. Risk assessments were regularly reviewed and offered clear guidance for the registered manager/provider on how to minimise identified risks. This demonstrated that the service protected people from risk whilst supporting them to lead full lives.

During the daytime some people were out at local centres or on work programmes. There were no additional staff working in the service, but the registered manager/providers were available at all times to support people.

There were appropriate storage facilities available for the medicines being used in the service. A Medicines Administration Records (MAR) was completed appropriately.

The service had procedures in place to record accidents and incidents. When we undertook this inspection visit records showed accidents had been recorded and a person's mobility reviewed to reduce the risk of falling.

The service did not use any moving and handling equipment such as hoists. This was because people were mobile and could be supported independently.

The exterior and interior of the building was clean, tidy and well-maintained. Records were available confirming fire; gas appliances and electrical facilities complied with statutory requirements and were safe for use.

# Is the service effective?

## Our findings

People had good access to a range of health support services. Care planning records covered the person's physical health and mental welfare. The health plans identified if a person needed support in a particular area. Although people living at the service had no specific healthcare needs and were in general quite independent. Reviews showed people's healthcare needs were being monitored and discussed with them as part of the care planning process. These visits were recorded in the daily log which might not show any trends or patterns as the information was collective including daily activities. The registered manager agreed a separate healthcare record would alert staff to identify any patterns or trends in the person's health. Care plans were not in easy read format which would support people with learning disability to understand the information being held. We spoke with the registered manager about this who agreed to introduce a pictorial format.

People were supported by skilled providers/manager who demonstrated a good understanding of their needs. The registered manager spoke about people knowledgeably. They provided a good insight into the individual levels of support people required. This demonstrated a depth of understanding about people's specific support needs and backgrounds.

The registered manager understood the meaning of the Mental Capacity Act 2005 (MCA) and the associated

Deprivation of Liberty Safeguards (DoLS) and how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected. The MCA provides a legal framework for acting and making decisions on behalf of individuals who lack the mental capacity to make specific decisions for themselves. The Deprivation of Liberty Safeguards provides a process by which a provider must seek authorisation to restrict a person for the purposes of care and treatment. There were no current DoLS authorisations in place for people using the service at the time of the inspection visit.

People's diet and nutrition was taken seriously. Meal planning was carried out as a group on a weekly basis to make it more flexible. This meant people could make more choices and choose foods they liked. Main groceries were delivered to the service, but one person liked to go shopping for other items which usually included fresh produce. One person told us they liked the variety of meals prepared for them. They said, "I like the meals. I get what I want". Staff cooked the main meals but some people were encouraged to make snacks and drinks with support as necessary.

One person had lost a lot of weight during the first few months of living at the service. This was a positive outcome for them due to the diet and exercise offered to that person. Their care records showed the effect of the weight loss had encouraged them to undertake more activities and it had improved the person's confidence.

# Is the service caring?

## Our findings

When we arrived for the inspection visit people were out at day centre facilities. Two people were then going out with the providers for a birthday meal. Two other people returned to the service later in the afternoon. When people returned they wanted to tell the registered manager what they had done during the day and what they would like to eat for supper. The atmosphere was relaxed and unrushed. The registered manager used this time to chat with people and share what had gone on during the day and what was happening during the evening. People were asked what they would like to do that evening. It was clear people felt comfortable and relaxed in the services environment. One person agreed to show me their room. They were very proud of the items they collected and displayed. They told us they liked their room and could use it whenever they wanted to. A relative told us, "Couldn't think of a more caring place for my [relative]. They put people first".

We spent some time in communal areas observing interactions between the registered manager and people who lived at the service. The registered manager was respectful and spoke to people with consideration. They were unrushed and caring in their attitude towards people. We saw relationships between people were relaxed and friendly and there were easy conversations and laughter.

We observed the routines within the home were relaxed and arranged around people's individual and collective

needs. We saw people were spending time doing what they wanted to. Both people were in the lounge listening to music of their choice and drawing. Some people had begun using a computer tablet; others enjoyed playing bowling using a computer game. The manager said group games were always welcome and it encouraged people to engage with each other.

Daily records were being maintained and demonstrated how people were being supported. The records communicated any issues which might affect their care and wellbeing. The registered manager told us this system made sure they were up to date with any information affecting a persons care and support.

The registered manager told us how they maintained people's privacy and dignity when assisting people with personal care, although most people living at Bos Y'n Dre were independent and required minimum personal support. The registered manager took time to introduce us and explain why we were visiting the service. They also asked peoples consent about speaking with us.

Prior to and following this inspection visit we received information from care professionals and commissioners of services who had involvement and an interest in the wellbeing of people who lived at Bos Y'n Dre. The feedback from them about the care being provided was very positive. They told us they were confident of the quality of care and support people received and had no concerns.

# Is the service responsive?

## Our findings

The service focussed on the importance of supporting people to develop and maintain their independence. People were encouraged to pursue personal interests and had no restrictions placed upon them with their daily routines. For example all four people went to day placements during the week. One person remained at the service two days a week. During this time they went out with the registered provider/manager for the day doing a variety of activities.

People were supported to maintain relationships with their friends and family members. For example some people spent week-ends or a holiday with members of their family. A person had recently reinstated links with a family member supported by the registered manager. The person was now in regular communication with them, which had been a positive outcome.

Care plans were structured and detailed the support people required. The care plans were person centred identifying how people would like their support to be provided. Where necessary relatives were involved in the care planning process and were kept informed of any changes to people's needs. One person told us they were aware they had a care plan and told us the manager often

spoke with them about what they needed or may have wanted. During the inspection visit we observed the registered manager asking people what they wanted to do and how they wished to spend the evening. Care plans were mainly in a written format. The registered manager agreed that by introducing an easy read format it would support people with a learning disability to better understand the information.

In addition to care plans each person living at the service had daily records which were used to record what they had been doing and any observations about their choice of diet and their physical and emotional wellbeing. These were completed each day. The registered manager told us it was a good system to record snapshots of what happens each day.

There was a policy and procedure in place for dealing with any complaints. This was made available to people and their families and provided people with information on how to make a complaint. An easy read version was available for people which used pictorial symbols alongside simple and limited text. No complaints had been reported. People told us they were aware of the complaints information and would be confident to raise any issues directly with the registered provider/manager.



# Is the service well-led?

## Our findings

People were observed to be comfortable and relaxed in the service. One person said, “(the manager) is very kind to me”. Relatives told us; “The home meets all my relative’s needs. They [providers] are very good. I am very happy with the care”. Also, “We have been able to spend a holiday together. It all went well”. Professionals told us they believed the service was well managed. They told us, “They provide a good service. My client has a good quality of life. I am very satisfied by the way its run”.

The service had a clear vision and put values, such as kindness, compassion, dignity, equality and respect into practice. The emphasis was the importance of supporting people to develop and maintain their independence. It was important to the registered provider/manager at the service, that people who lived there were supported to be as independent as possible and live their life as they chose. This was reflected in the care planning documentation.

People and their relatives were consulted whenever changes occurred both formally and informally. People talked together frequently to discuss any plans or changes. Decisions were made individually and as a group about activities, outings, meals and any changes made to the environment. This showed people were provided with as

much choice and control as possible about how the service was run for them. The views of people were being taken into account. A recent survey showed people were happy living at Bos Y’n Dre and they said they had everything they needed. However the forms were not in an easy read format which would help people to understand the information more clearly.

The registered manager regularly audited the service policies and procedures to ensure they reflected current good practice guidelines. Some of the audits included medicines, accidents and incidents and maintenance of the home. Further audits were carried out in line with policies and procedures. For example we saw fire tests were carried out weekly and emergency lighting was tested monthly.

Documentation relating to the management of the service was clear and regularly updated. For example, peoples’ care and support records and care planning were kept up to date and relevant to the person and their day to day life. This ensured people’s care needs were identified and planned comprehensively and met people’s individual needs. The service understood and complied with their legal obligations, from CQC or other external organisations and these were consistently followed in a timely way.