

Quest Haven Limited

The Ranch

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

This inspection was carried out on 24 May 2017.

The Ranch is registered to provide accommodation with personal care for up to three people. At the time of our inspection there were three people living at the service all of whom had a Learning Disability. People required minimal support with staff encouragement and prompting as they were able to attend to most of their own personal care needs.

At the last inspection in 31 May 2016, the service was rated Good, however, we found the service was in breach of Regulation 18 (1) (2) (e) of the Care Quality Commission (Registration) Regulations 2009 (Part 4). The registered person had failed to notify the Commission of a safeguarding incident in relation to a service user. During this inspection we found the service was now meeting this regulation.

A registered manager was in post. 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.

Staff and the provider undertook quality assurance audits to ensure the care provided was of a standard people should expect. Any areas identified as needing improvement were attended to by staff.

People and staff were empowered to contribute to improve the service. People and staff had regular meetings where they were able to put forward suggestions of how to improve the service. These were listened to and acted on. People, relatives and associated professionals had been provided with the opportunity to state their views about the care provided and how the home was run through an annual survey in 2016.

There was a set of values that included the aims and objectives, principles, values of care and the expected outcomes for people. This was displayed at the service. We observed staff putting these into practice.

Records of accidents and incidents were maintained at the service and the registered manager undertook monthly audits to identify any trends and took action as required to maintain the safety of people.

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 well-led?

Good ●

The service was well led.

There was a system in place to request the views from people about the care and support they received from the service.

There was a registered manager in place who was registered with the Care Quality Commission.

Staff felt supported by the registered manager.

Quality assurance processes were in place to monitor and improve the service.

The Ranch

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 focused inspection to ensure that the provider was meeting a breach that was identified at the previous inspection in May 2016.

This was an unannounced inspection which took place on 23 May 2017. The inspection team consisted of one inspector.

Prior to the inspection we reviewed the information we had about the service. This included information sent to us by the provider, about the staff and the people who used the service. As this was a focused inspection to look at a previous breach we did not ask the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we spoke with the registered manager, one member of staff and two people. We looked at the quality assurance monitoring tools used at the home, minutes of staff meetings and residents meetings and records of accidents and incidents.

The last inspection of this home was on 31 May 2016 where we found one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Is the service well-led?

Our findings

At our inspection of May 2016 we found the service was in breach Regulation 18 (1) (2) (e) of the Care Quality Commission (Registration) Regulations 2009 (Part 4). The registered person had not notified the Commission of a safeguarding incident in relation to a person. During this inspection we found the provider had made the required improvements to address this breach of regulation. There had not been any safeguarding incidents since our last inspection. However, the registered manager also manages another care service belonging to the provider. The registered manager had forwarded safeguarding Notifications from that service to the Care Quality Commission. Therefore the register manager understands the requirement to send notifications and also has a system in place which should ensure that any future notifications are sent to us. We receive notifications of certain incidents or events so we are able to monitor the service and determine if further actions are required.

People, relatives and stakeholders were encouraged to give feedback about the service. The provider had undertaken a survey to ascertain the views from people, their relatives and associated professionals about the care provided by the service in July 2016. However, none of the surveys were returned at that time. The provider told us that the survey will be undertaken again in June 2017.

People were empowered to contribute to improve the service. People told us they had residents' meetings when they were able to offer their views about the home. People told us that they talked about food, their bedrooms and the things they wanted to do. For example, going out on activities or shopping. One person told us, "We make suggestions about meals we like such as spaghetti bolognese and lasagne, and we have it." Another person told us, "We talked about a holiday to Lanzarote, we went there in January." We saw the minutes of resident meetings that had taken place during the last five months. Topics discussed included things that people wanted. For example, one person had reported that their chest of drawers had broken and they needed a new one. We spoke with this person who told us that staff had already been out with them to look at new drawers, but they did not see any they liked. They told us that they would be going shopping again for this item. Other topics discussed included making plans for holidays, hobbies and interests. We noted that one residents meeting had involved teaching people what to do in the case of an emergency. For example, what they should do if a member of staff was on their own and they had passed out. We asked people to tell us what they had learnt from this. They were very clear on the procedure to be followed and where to find the emergency telephone numbers for the organisation. One person told us, "We would always dial 999 and get an ambulance here."

There was an open culture at the service. Staff told us they felt supported by the registered manager. One member of staff told us, "The registered manager is always available to staff and is involved in the day to day running of the home. The registered manager is very approachable and we can talk to him about anything." Staff told us they had regular staff meetings with the registered manager when they discussed people living at the home, menus, training needs and suggestions of how to improve the service. For example, one member of staff told us that they had put forward a suggestion to have daily cleaning schedules for each area of the home that would further improve infection control. We saw that clear cleaning schedules had been put in place and these were monitored by the provider. Staff also told us that they had daily handover

meetings twice a day, sometimes three if a member of staff was finishing their duties at 3:00pm. This provided opportunities for staff to discuss what had happened on each shift and to provide updates on individual people's needs. For example, healthcare appointments.

The provider had a set of values and vision for the service and these were on display. For example, choice, compassion and inclusion into the community. Staff were aware of these and were observed working within the values for the service. We observed staff interacting with people in a quiet and respectful manner, asking them for their views, offering choices and attending to the requests made by people. During discussions it was clear that staff had a clear understanding of the values and how they put them into practice. For example, on the day of our inspection people were being supported to attend the local community for activities. For example, bowling, day centres and leisure centres.

The service was quality assured to check that a good quality of care was being provided. We saw monthly audits had been undertaken by the provider. Audits we looked at included care plans, risk assessments, MARs, maintenance records, fire alarms, emergency lighting and monthly fire evacuation practices. The monthly visits also included discussions with people who lived at the home to ascertain their views about the care and support they received. No issues had been identified in these audits. As part of improvement the provider applied for and gained planning permission to extend the property. This was to add en-suite bathrooms to improve the facilities for people.

Staff knew the procedures for reporting accidents and incidents. Staff told us they reported all incidents and accidents to the registered manager and these would be discussed during staff meetings. Staff told us this helped them to reduce the risk of repeated accidents. Records of accidents and incidents were maintained at the service. There had been one incident since our last inspection. An analysis of this incident had been undertaken and discussed with staff during a staff meeting.

There was a management structure in place that included the registered manager, senior carers and carers. This led to a structure where everyone knew their own roles and were accountable for their performance.