

Mr A Maguire

Adrian House - Leeds

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

Care service description

Adrian House is a small family run home for men with learning disabilities and is registered to provide accommodation and personal care. It currently provides this service for six men. The accommodation is in two joined terrace houses in the Chapeltown area of Leeds.

Rating at last inspection

At the last inspection, the service was rated Good.

Rating at this inspection

At this inspection we found the service remained Good.

Why the service is rated

People told us they felt safe and secure living at this service and their health care needs were met. It was evident from our discussions with staff they had an in-depth knowledge of people's care and support needs. Staff knew about people's interests and how they preferred to spend their time. There were sufficient numbers of suitably qualified and competent staff. Care plans were detailed and person centred. People were empowered to take responsibility and were involved in the running of the service. There was evidence of checks carried out to assess and monitor the quality of the service provided.

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.

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.

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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 which took place on 23 January 2017 and was unannounced. The inspection team consisted of two adult social care inspectors.

Before the inspection, the provider had completed 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. We reviewed all the information we held about the service. This included any statutory notifications that had been sent to us. We contacted the local authority and Healthwatch. This information was reviewed and used to assist with our inspection. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

At the time of this inspection there were six people living at Adrian House. We spoke with three people who used the service, three staff members and the registered provider. We spent some time looking at documents and records that related to people's care and support and the management of the service. We looked at two people's care plans.

Is the service safe?

Our findings

People we spoke with told us they felt safe living at Adrian House. Their comments included, "You are safe here" and "I feel safe." Information on recognising and reporting abuse was on display and staff had received safeguarding training. We saw a protocol for staff to follow in the event of person going missing without explanation for over a 12 hour period.

Risks had been appropriately assessed, monitored and reviewed. Fire safety checks had been regularly carried out and people had personal emergency evacuation plans in place. One person said, "If there was a fire, I would get out of the house and wait at the end of the street."

We saw the electrical wiring certificate had expired. During our inspection the registered provider took the necessary action to promptly resolve this and arranged for a contractor to complete this testing following our inspection.

During our inspection we saw a risk assessment for window openings was in place which showed this had been appropriately assessed. People living at this service were not at risk of falls from height. The registered provider told us they had scheduled additional maintenance of windows immediately following our inspection and was able to evidence this.

People told us they received their medicines when they needed them. Their comments included, "I always get my meds."

We found there were safe arrangements in place for managing people's medicines. Medicines were stored safely in a secure cupboard in one area of the home. The registered provider described how they would make this more robust and we found this was appropriate.

The registered provider had not recruited any new members of staff for some time but we saw robust recruitment procedures for new staff were in place.

People we spoke with told us a member of staff was always around to help them if needed. One person told us, "Staff are around all the time to help me if I need them." We found staffing levels were sufficient to meet the needs of people who used the service.

Is the service effective?

Our findings

The registered provider had a training programme in place. We saw staff had received training in mandatory topics, such as first aid and fire safety. In addition some staff were in the process of completing or had completed National Vocational Qualifications. We saw evidence staff members had received an individual observation check, an annual appraisal and had completed a yearly self-reflection in 2016. The registered provider stated in the PIR, 'To improve ourselves and the service, we will be reviewing training so we are service fit to practice'.

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 saw staff had received training in MCA and we observed people making choices throughout our inspection. People's consent to care and treatment was recorded along with their capacity to make decisions about their care. We saw examples where the best interest decision making process under the MCA had been followed. Information about advocacy services was available to people if needed.

People we spoke with were positive about the food. One person said, "Food is alright, I enjoy it. We are having fishcakes for tea. I get enough to eat and drink." We asked a staff member about how they planned menus and they said, "We will ask the guys what they want."

Needs relating to nutrition and hydration were recorded in care plans. Dietary requirements for health or culture needs were provided for when required. One staff member told us, "We discussed healthy ways of eating and people have agreed to a healthier eating regime."

People told us staff contacted health professionals when they needed this support. One person said, "I let staff know if I am not well and they get the doctor. I go to the opticians once a year."

One health professional who commented on staff told us, "It's always been really good communication. If they do have any issues they let us know. They do manage a complex group well." We saw feedback from a health professional dated January 2017 which noted, 'Very open and willing to discuss all health related issues. Take advice well and follow plans suggested by [name of organisation]'.

Care plans showed people's day to day health care needs were being met.

Is the service caring?

Our findings

People told us they liked living at Adrian House. Their comments included, "It is very good, and everyone gets along. I am happy with the way it is", "I have been here a long time and I am happy. I am well looked after, I am satisfied" and "It is really good living here, I am looked after and I am happy." People were very comfortable in their home and decided where and how to spend their time. People's care was tailored to meet their individual preferences and needs. People looked well cared for.

During our inspection staff were attentive to people they were caring for and demonstrated they knew people very well, including people's family members and visitors. They were able to explain how they supported people individually and knew how to approach people in a way which would ensure best possible outcomes for those people. For example, where people were resistant to managing their own care needs, staff knew how to support and encourage them appropriately.

People said they were involved in making decisions about their care and support. We saw people had input into their care plans and were involved in their reviews. Information was provided, which included pictorial formats, to help people understand the care and support required. Where required, staff were respectful of people's cultural and spiritual needs.

People told us staff respected their privacy and dignity. Their comment included, "They respect me, I have my own private room" and "Staff knock on my door and ask if they can come in." We observed staff were respectful when talking with people and they knocked on people's bedroom doors before entering. The wishes of people who preferred not to be disturbed were respected.

We saw feedback dated November 2016 from a professional who worked with this service which stated, 'In my observations, management and staff always treat the service users with respect'.

The registered provider told us people's equality, diversity and human rights were respected. They told us about one person's communication preferences as they had sensory needs and another person was being supported to have a relationship with someone who did not use this service. They said any written information could be produced in large print if needed.

Is the service responsive?

Our findings

Each person had a care plan tailored to meet their individual needs. We saw people had been involved in creating their care plan and any subsequent reviews of their care. Staff kept daily records which gave sufficient information about people's daily lives. Care plans seen contained information on people's preferences, likes and dislikes, how they wanted to be cared for and their level of involvement they liked in their care.

People were allocated a member of staff, known as a keyworker, who worked with them to help ensure their preferences and wishes were identified. One person told us, "Sometimes I have a one to one meeting and this is about once a month."

Feedback from a professional who worked with this service dated December 2016 stated, 'They keep me informed constantly about any changes in the service or with each service user'.

People were supported in promoting their independence and community involvement. People told us they liked to go out for a walk, go to the pictures or spend time in the home. One person said, "I go out by myself and see my family. I do the garden sometimes; there is enough to keep me entertained. We watch TV together." We saw a member of staff looking online to find out about upcoming DVD releases which they thought people might enjoy based on their interests.

Feedback from a professional dated February 2016 stated, 'All have a choice in what they want to do and nearly everyone goes out to different places each day'. The registered provider described how they regularly supported one person with sensory needs to decide whether they wanted to go out in the community and gave them choice each time.

People we spoke with told us they knew how to complain. One comment included, "If I am not happy, I would have a word with the family and they would listen." We saw information on how to complain was available in an 'easy read' format which meant this was accessible for people who received this service. People were given an opportunity to talk about concerns or complaints at monthly 'house' meetings. We looked at the record of complaints and saw this included low level concerns raised by people. In each case, we saw people had been listened to and supported by staff who resolved their concerns. For example, in response to one person's dissatisfaction, the registered provider carried out a review of their care to ensure they were meeting this person's needs.

Is the service well-led?

Our findings

At the time of this inspection the provider was registered as an individual who was in day to day control of the service and was not required to have a registered manager. 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.

People spoke positively about the registered provider. One person told us, "They run it well and they are very good people."

The registered provider sought feedback about the service through surveys, meetings and reviews, involving other professionals, relatives and people who used the service. The registered provider said, "We do send out family feedback sheets and no one sends them back." Feedback from other professionals was very complimentary. We saw feedback dated November 2016 from a professional which stated, 'Never any problems or issues. Just a well-run house by a great management and staff who just pull together as a team'. The registered provider stated in the PIR, 'Management proactively ask for feedback from service users and how do they feel their home is run, contract department and stakeholders'.

Staff had daily meetings which showed people's needs were considered on a daily basis. The registered provider stated in the PIR, 'Daily, staff meet together to discuss the weather, work day, visitors, and appointments and plan accordingly'.

We looked at records of monthly 'house' meetings and saw these were well attended. They covered business from the last meeting and looked at standing items, for example, health and safety, maintenance and fire safety were discussed. Each meeting looked at items discussed and objectives were recorded, along with obstacles to achieving those targets and a plan for meeting them. Every month people agreed which day-to-day tasks they were willing to be involved in as part of running the service. One person said, "We have a house meeting once a month and talk about how we would get out if there was a fire."

We saw an annual quality audit for April 2015 which included medication, maintenance of the building, the garden area, staff handovers and training. All policies and procedures we looked at were found to be up-to-date. The registered provider told us they wanted to introduce six monthly overall service audits. These checks were to be used to identify action to continuously improve the service.

Documentation showed the management team took steps to learn from events such as accidents and incidents and put measures in place so they were less likely to happen again.

We found relevant notifications had been submitted to the CQC by the registered provider.