

MacIntyre Care Westonia Court

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

Westonia Court is a residential care home providing personal care and support for up to eight people with learning disabilities. At the time of our inspection five people were using the service.

At the last inspection, the service was rated Good.

At this inspection we found the service remained Good.

People using the service felt safe. Staff had received training to enable them to recognise signs and symptoms of abuse and felt confident in how to report them.

People had risk assessments in place to enable them to be as independent as they could be whilst remaining safe. Staff knew how to manage risks to promote people's safety, and balanced these against people's rights to take risks and remain independent.

There were sufficient staff, with the correct skill mix, on duty to support people with their needs.

Effective recruitment processes were in place and followed by the service. Staff were not offered employment until satisfactory checks had been completed. Staff received an induction process and on-going training. They had attended a variety of training to ensure they were able to provide care based on current practice when supporting people. They were supported with regular supervisions.

Medicines were managed safely. The processes in place ensured that the administration and handling of medicines was suitable for the people who used the service.

People were supported to make decisions about all aspects of their life; this was underpinned by the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Staff were knowledgeable about this guidance and correct processes were in place to protect people. Staff gained consent before supporting people.

People were able to make choices about the food and drink they had, and staff gave support when required to enable people to access a balanced diet.

People were supported to access a variety of health professional when required to make sure they received continuing healthcare to meet their needs.

Staff provided care and support in a caring and meaningful way. They knew the people who used the service well. People and relatives, where appropriate, were involved in the planning of their care and support.

People's privacy and dignity was maintained at all times.

People were supported to follow their interests and join in activities of their choice.

People knew how to complain. There was a complaints procedure in place which was accessible to all. Complaint had been responded to appropriately.

Quality monitoring systems were in place. A variety of audits were carried out and used to drive improvement.

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

Westonia Court

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 comprehensive inspection took place on 18 January 2017 and was announced. It was carried out by two inspectors.

The provider was given 18 hours' notice because the service was a small care home for adults who are often out during the day; we needed to be sure that someone would be in.

Before the inspection the provider 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 checked the information we held about this service and the service provider. We also contacted the Local Authority. No concerns had been raised and the service met the regulations we inspected against at the last inspection which took place in October 2014.

During our inspection we observed how staff interacted with people who used the service and we observed breakfast, lunch and a variety of activities.

We spoke with five people who used the service, the registered manager, two senior support workers, two support workers and a student on placement.

We reviewed three people's care records, five medication records, six staff files and records relating to the management of the service, such as quality audits.

Is the service safe?

Our findings

When asked if they felt safe one person who used the service replied, "Yes, I am very safe here." People were protected from avoidable harm and abuse by staff who showed a good understanding of the safeguarding. One staff member said, "If I thought there was any abuse I would report it immediately to safeguarding." Another said, "We need to keep people safe so would speak up on their behalf."

Each person had risk assessments in place to enable them to be as independent as possible taking into account the associated risks. These included; accessing the community, using the transport and personal care. These had all been reviewed regularly. Staff we spoke with told us they updated risk assessments when required and carried out additional ones for extra activities such as holidays.

Staff were recruited following a robust procedure. One staff member said, "I had to bring in a lot of documentation, for example my passport, birth certificate, proof of where I lived." Documentation showed that correct checks had been carried out for all staff before they started.

It was obvious from our observations that there were enough staff of varying skills on duty to support people with their chosen activities. Staff told us, and records confirmed that the rota was flexible to accommodate individual's choice of activities. One said, "We always have enough staff and never use agency. We cover each other and have our own bank staff. That is better for the people we support."

Medication was managed safely. Each person had their medication securely locked in their room. We carried out a stock check and found that stock balances were reflective of numbers recorded on Medication Administration Record (MAR) charts. Each person had a medication profile which explained allergies, where creams were to be applied, why and how frequently, using body maps. Each medication was described and for one person where they had, epilepsy there was a separate guidance folder for it.

Is the service effective?

Our findings

People received care and support from staff with the required skills and knowledge. One staff member said, "We are offered a lot of good training." The registered manager told us the provider had a training department who arranged and booked any training requested. They maintained a matrix and informed staff and the registered manager when any training was due. Documentation showed all staff training was up to date.

Staff told us they were supported by the registered manager and the provider. A student on placement said, "Everyone here has been really supportive. I have learned a lot from the staff." They went on to tell us what they had learned and how they put it into practice. Staff had received regular supervisions and annual appraisals.

Throughout the day we observed staff gaining consent from people. For example, asking if they were ready to go out to their activity and if staff could help with putting on coats. Where they had been able people had signed to give consent for their care and support.

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 MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Some people were subject to a DoLS and staff knew who they were and why they were in place.

People told us they enjoyed the food. When we arrived people were having breakfast. One person said, "It is good." They went on to tell us they all took a packed lunch to their daily activity, which they helped to prepare the previous evening. Staff told us that everyone had a meeting once a week to plan the menu for their main evening meals for the week and the menu was written from this. One person each evening helped where possible in the preparation of the meal and the setting of the tables. Documentation showed this to have happened.

Each individual had a health passport which contained all of their medical information. Within these we saw that people had attended appointments with health care professionals to maintain their health.

Is the service caring?

Our findings

People were treated with kindness. One person said, "The staff are nice. They help me." We observed positive interactions between staff and people who used the service. People were at ease and comfortable in the presence of staff.

Staff were able to tell us about individuals' likes and dislikes, their hobbies and interests and about important family relationships. We saw staff spend time with people, making sure they understood what was happening and when they needed to be ready.

Where possible people had been involved in the development of their care and support plans. We saw evidence of this in records we reviewed.

The registered manager told us that they had access to an advocacy service if it was needed by anyone. There was an easy read poster advertising this on the notice board. At the time of the inspection no one was using an advocacy service.

The registered manager told us that all confidential information was kept in the locked offices. The computer and tablet were password protected. This ensured information was only accessed by people who had relevant permission.

Staff said, "Everyone has their own flat and we treat it as their homes. We always knock and wait for reply." People were observed to be treated with privacy and dignity. Staff spoke with them in a calm manner and encouraged independence.

People told us they could have family and friends to visit. Staff told us that most people went to visit family for weekends or at holiday time.

Is the service responsive?

Our findings

Staff told us they had monthly meetings with each individual to update their care plans. They said they involved the person as much as they were able to ensure their views were documented. Records showed this had taken place. Care plans were personalised and written for each individual and had been reviewed regularly.

People told us about the different activities they attended. One person said, "I went to the pub and had lunch." Another said, "I went to the cinema." Staff said, "We do all sorts with them. Whatever they want to do we arrange it if possible." Another said, "They are always going out and about." On the day of our inspection most were going to a day centre. People told us what they did when they were there and how they enjoyed going. Another person told us they were all going to a disco that evening.

One person who used the service told us they had friends which they met at different activities, and how nice it was to see them. The registered manager told us some people had made friends with people who lived in other services belonging to the provider. They went on to say they tried to make sure these friendships continued by supporting people to meet up at different activities.

People we spoke with told us they would complain if they had reason to. There was a complaints policy and procedure which was also available as an easy read to enable people who used the service to complain. We saw that complaints had been recorded and responded to following the correct procedure.

The registered manager told us that they gave each person a questionnaire annually. This was in an easy read/pictorial format. People were encouraged to get family or a member of staff to assist them with completing it. We saw completed questionnaires and where there had been any comment, the registered manager had responded to the individual.

Is the service well-led?

Our findings

Staff told us they were involved in the development of the service, both at location and provider level. They told us they were able to voice their opinions, which would be listened to, at regular staff meetings.

Staff told us, and we saw, that there was a positive, open and transparent culture in the service. One staff member said, "We can talk to [name of registered manager] at any time. They are always available for us." Staff told us that the provider had a whistleblowing procedure and they would use it if required.

There was a registered manager in post who met their CQC registration requirements. 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.

The registered manager was aware of the day to day activities in the service. We observed them assisting people to get ready for their activities. It was obvious from our observations they knew the people and staff well. Both were comfortable in their presence.

A number of quality audits had been carried out by both the registered manager and a provider representative. These included; health and safety, medication and care plans. Where any issues had been found, action plans were in place.