

Milewood Healthcare Ltd

# Redfern

## Inspection report

6 Saint Vincent Terrace  
Redcar  
Stockton On Tees  
Cleveland  
TS10 1QL

Tel: 01642487766  
Website: [www.milewood.co.uk](http://www.milewood.co.uk)

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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

Redfern is a large terraced house which is registered to accommodate a maximum number of seven people with a learning disability. The property is within walking distance of the beach, town centre and many local amenities, including transportation links to nearby towns. There were seven people using the service at the time of the inspection.

At the last inspection in October 2014, the service was rated 'Good'. At this inspection we found the service remained 'Good'.

People were kept safe from avoidable harm and staff understood the process to follow to safeguard people if they needed to report any concerns. Risks to people were identified and plans were put in place to help manage the risk and prevent harm. Medicines were managed safely with an effective system in place. Staff competencies, around administering medication, were regularly checked. Appropriate checks of the building and maintenance systems were undertaken to ensure health and safety was maintained.

There were sufficient staff on duty to meet the needs of people who used the service. Staff provided people with the support they needed and with visits out in the community. There was a system in place to ensure that new staff had the appropriate skills and experience and were of good character.

People were supported by a consistent team of staff who were knowledgeable about people's likes, dislikes and preferences. A comprehensive training plan was in place and all staff had completed up to date training. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. People were able to make decisions about their day to day care. Staff supported people to maintain their health and attend routine health care appointments.

Care plans detailed people's needs and preferences and were person-centred. Care plans were reviewed on a regular basis to ensure they contained up to date information that was meeting people's care needs. People were actively involved in care planning and decision making. People who used the service had access to a wide range of activities and leisure opportunities. The service had a clear process for handling complaints.

The registered manager promoted a positive, person-centred culture and was committed to making continued improvements to the delivery of care. Regular audits were carried out to identify areas for improvement.

## 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 remains safe.

Good ●

### Is the service effective?

The service remains effective.

Good ●

### Is the service caring?

The service remains caring.

Good ●

### Is the service responsive?

The service remains responsive.

Good ●

### Is the service well-led?

The service remains well led.

Good ●

# Redfern

## 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 registered 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 17 March 2017 and was announced. We informed the registered provider of our inspection the day before. We did this because people who use the service are often out and we needed to be sure somebody was in.

The inspection was carried out by one adult social care inspector.

Before the inspection we reviewed all the information we held about the service which included notifications submitted to CQC by the registered provider. We emailed the local authority commissioning team to gain their views.

The registered provider had completed a provider information return (PIR). This is a form that asks the registered provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to help plan for the inspection.

We sat in communal areas and observed how staff interacted with people. We met and spoke with all people who used the service. We looked at communal areas of the service and in one bedroom. We spoke with the registered manager, deputy manager, a senior support worker and three support workers

During the inspection we reviewed a range of records. This included two people's care records including care planning documentation and medicines records. We also looked at three staff files, including recruitment, supervision, appraisal and training records, records relating to the management of the service and a wide variety of policies and procedures.

## Is the service safe?

### Our findings

People told us they felt the service was safe. One person told us, "I love living here. I wouldn't have a bad word said about it. The staff care about us." Another person said, "Yes I feel safe."

Staff confirmed they had been provided with safeguarding training and that they had an understanding of their responsibilities to protect people from harm. Staff could describe the different types of abuse and were clear of the actions they should take if they suspected abuse. Staff knew about whistle blowing procedures. Whistleblowing is one way in which a worker can report concerns in good faith, by telling their manager or someone they trust. This meant staff were aware of how to report any unsafe practice.

Recruitment procedures were thorough and all necessary checks were made before new staff commenced employment. For example, Disclosure and Barring Service checks (DBS). These were carried out before potential staff were employed to confirm whether applicants had a criminal record and were barred from working with people.

Risks to people were recorded and reviewed with control measures put into place to mitigate against any assessed risks. We found detailed risk assessments to demonstrate people's involvement in risk taking. For example, when using kitchen equipment, self harm and going out into the community. The registered manager told us they promoted positive risk taking. Risk assessments had been personalised to each individual. Staff told us how people were supported to take responsible risks as part of their daily lifestyle with the minimum necessary restriction. For example, some people carried their own personal money when out shopping within an agreed financial limit. Staff and professionals had completed a risk assessment for one person about accessing the community independently. In order to ensure their safety the assessment identified that the person would go out independently for up to four hours at a time. Dedicated points in the town centre were identified for dropping the person off and picking them up. In winter months the person would go out earlier in the day, whilst during the summer months they could vary the times they went out. This person who used the service said, "I love going out on my own. I love my own independence and being my own boss." This meant that people were supported and encouraged to take responsible risks.

The registered provider had systems and processes in place for the safe management of medicines. Staff were trained and had their competency to administer medicines checked on a regular basis. Medicine administration records (MAR's) were completed correctly with no gaps or anomalies.

There was enough staff to support people's needs. During the day there were three care staff on duty and at night there were two care staff, one of which went to sleep when people who used the service went to bed. This member of staff could be called upon at any time if needed. People told us there were sufficient staff on duty to enable them to take part in activities and go out with staff. Staff confirmed there were enough staff on duty to support people.

We looked at records which confirmed that checks of the building and equipment were carried out to ensure health and safety. Tests of the fire alarm were undertaken to confirm it was in working order and fire drills

took place involving staff and people who used the service. One person who used the service said, "We all take part in fire drills." Water temperature of baths, showers and hand wash basins were taken and recorded on a regular basis to make sure they were within safe limits.

## Is the service effective?

### Our findings

People who used the service who told us that staff provided a good quality of care. One person said, "I am really happy here. Sometimes I get bad tempered and they [staff] really help to calm me down."

Staff told us they felt well supported and that they had received supervision and an annual appraisal. Supervision is a process, usually a meeting, by which an organisation provide guidance and support to staff. We saw records to confirm that supervision and appraisals had taken place. A staff member we spoke with said, "We [staff] get lots of support from our manager who is always available and very easy to talk to."

Records showed care staff had received the training they needed to meet the needs of the people using the service. This training included health and safety, safeguarding, first aid, infection control, moving and handling, medication and fire safety. Staff told us they had enough training to enable them to support people and meet their needs. One staff member said, "A lot of our training is heavily theory based and is very relevant to the job we do." Specialist training had also been completed for Management of Actual or Potential Aggression (MAPA). This training helps staff deal with people's aggression in a calm way and keep people safe.

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 Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Where people lacked capacity to make decisions, staff told us they, other professionals and family members had made best interest decisions, however, we noted there wasn't always a written record kept of this. The registered manager told us they would take immediate action to address this. The registered manager kept a tracker of all DoLS authorisations so these could be renewed in a timely manner.

We looked at the home's menu plan. The menus provided a varied selection of meals and choice. Staff supported people to make healthy choices and ensured that there was a plentiful supply of fruit and vegetables included in people's diet. People told us they were involved in some food preparation. One person said, "I like cooking. I like to make an apple crumble. I need help to cut up the apples but I can do the rest."

Since the last inspection the registered manager had implemented nutritional screening for people who used the service. They had introduced the Malnutrition Universal Screening tool (MUST). MUST is a five-step screening tool to identify adults, who are malnourished, at risk of malnutrition or obese. As part of the screening people are weighed at regular intervals.

We saw records to confirm that people had visited or had received visits from the dentist, optician, chiropodist and their doctor. The registered manager said that they had excellent links with the doctors and community nursing service. Visits from professionals were recorded in care records and detailed outcomes of these visits. One person told us they had been supported by staff on the day of the visit to go to their doctor and get their blood test results. On return they told us, "Good news my blood tests were ok."

We saw that people had a hospital passport that contained detailed information about the person and had been reviewed regularly. The aim of a hospital passport is to assist people with a learning disability to provide hospital staff with important information they need to know about them and their health when they are admitted to hospital.

## Is the service caring?

### Our findings

People we spoke with during the inspection told us that they were very happy and that the staff were very caring. One person said, "I love all the staff. I love every one of them and I think the world of them." Another person said, "They [staff] are very nice and help me."

We observed that staff and people had developed strong and meaningful relationships. Staff were able to tell us about people's backgrounds, preferences and interests. Care records had information about people's histories and background including education, family, social network, and individual preferences. Staff understood people's preferences and respected them. We heard staff address people by their preferred names and we saw staff supporting people the way they wanted. Staff understood people's communication needs. These were detailed in their care records. We saw staff communicate with people very well. Staff were patient when speaking with people and took time to make sure that people understood what was being said.

Observations throughout the inspection showed staff were caring and respected people's privacy. One person became upset when eating their lunch and staff supported them to an area where they could chat. Staff made the person a cup of tea, chatted with them and provided reassurance. The person returned to the dining area and was much more content. A staff member told us, "Patience is one of the many things needed in this job and I have loads of patience and understanding."

There were many occasions during the day where we saw staff and people who used the service engaged in conversation, general banter and laughter. We saw staff speak with people in a friendly and courteous manner and noted staff were discreet when speaking to people about their personal care. Staff were seen to adjust the clothing of one person who used the service to promote their dignity. This showed us that that people were treated with dignity and respect and this promoted their well-being.

We saw that people were able to move freely and safely around the service and could choose where to sit and spend their recreational time. People were able to choose to go to their rooms at any time during the day to spend time on their own. This helped to ensure that people received care and support in the way that promoted their comfort, security and happiness.

Staff encouraged people to be independent and make choices such as what they wanted to wear, eat, and drink and how people wanted to spend their day. We saw that people made such choices during the inspection day. Staff told us how they encouraged independence on a daily basis. Information on advocacy was available for anyone who required this and was displayed around the service.

The registered manager and staff told us how they promoted equality and diversity. They told us the importance of treating people as individuals and everyone having the same chances in life. There was an easy read, pictorial guide on equality and diversity for people who used the service. This guide enabled people to understand that everybody has the right to be treated fairly.

Redfern provided a stimulating environment with staff who were warm and welcoming. People, staff and relatives had developed strong and mutually respectful relationships.

## Is the service responsive?

### Our findings

People told us staff supported them in the way they needed and preferred. One person said, "They [staff] know me inside out. Whatever I need help with, I get it."

People visited the service on many occasions to have their needs assessed before they moved in. This enabled people and staff to get to know each other and to determine if the placement was suitable.

We saw people received person centred care. This meant the service putting people at the centre of all decisions whilst working alongside other professionals to achieve the best possible outcome. During discussion staff told us how they carefully considered what people wanted, their values, family, lifestyle and how to treat the person as an individual. During our visit we reviewed the care records of two people. We saw people's needs had been individually assessed and plans of care drawn up. The care plans included people's personal preferences, likes and dislikes. For example the care plan for one person described in detail how to meet their personal care needs. The care plan informed to allow the person 15 minutes privacy to undress before staff provided support. The care plan provided clear information on what the person could do and the assistance needed from staff. This helped to ensure people received care that was acceptable to them.

People were supported to access activities in the community which included visits to shopping centres, the gym, football, sewing, cooking and flower arranging classes and for meals out. One person said, "I like to go to the gym to do cardio." They told us how some of the staff also had gym memberships and they liked it when those staff went with them as they would join in the exercise and provided encouragement. One person said, "I'm going to football tonight. I have bought a new water bottle to take with me." Another person said, "On a Friday I go to a cooking class at Skelton which I love." The same person told us they went on an annual holiday. They said, "I go abroad every year with one of the staff. I really enjoy the flying and being in the aeroplane."

The registered provider had a complaints policy that was also available in an easy read and picture format so that people could understand what they should do if they wanted to make a complaint. People confirmed they knew how to make a complaint. There have not been any complaints since we last inspected the service in October 2014.

## Is the service well-led?

### Our findings

People who used the service spoke highly of the registered manager. One person said, "I really like [name of registered manager]."

Staff told us the service was well-led and the registered manager was extremely approachable and supportive. One staff member said, "[Name of registered manager] is as professional as a manager needs to be, but at the same time she is approachable. She's a role model really." Another staff member said, "[Name of registered manager] is great. I love my job and I love coming to work."

The service has a registered manager. They had been registered manager at Redfern since April 2014. They were also responsible for the management of three other nearby care homes owned by the registered provider. Since the last inspection of the service deputy managers had been recruited and supported the registered manager in the effective running of services.

The registered manager and other senior staff carried out a number of quality assurance checks, in areas including medication, care planning, health and safety and staff files, to monitor and improve the standards of the service. Action plans were produced when required and these were reviewed by the registered provider's senior management team to ensure all actions had been completed. The senior management team also completed their own quality audits every month to ensure the effective running of the service

Regular staff meetings had taken place and minutes of the meetings showed that staff were given the opportunity to share their views. Management used these meetings to keep staff updated with any changes within the service and to provide feedback on recent inspections or compliance visits. Meetings for people who used the service had also taken place. These were used to discuss menu choices, activities, bullying, decoration of the service and to ask people if they had any concerns or complaints and any suggestions they had for improvement at the service.

We looked at the culture of the service, including if it was open, transparent and accountable. Throughout the inspection staff were open and cooperative, answering questions and providing the information and documents that we asked for. One staff member said, "We have an incredible staff team. Everyone is ridiculously friendly, everyone is a team player and we have an excellent rapport. At the risk of sounding cheesy we are like one big happy family."

The registered manager understood their role and responsibilities, and was able to describe the notifications they were required to make to the Commission. These had been received where needed.