

Random inspection report

Care homes for adults (18-65 years)

| | |
|----------|------------------------------------------------------|
| Name: | Visions |
| Address: | 48 Nags Head Hill St George Bristol BS5 8LW |

| | |
|-------------------------------------------|-----------------------|
| The quality rating for this care home is: | two star good service |
| The rating was made on: | |

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

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|------------------------|--------------|---|---|---|---|---|---|---|--|
| Lead inspector: | Date: | | | | | | | | |
| Paula Cordell | 1 | 0 | 0 | 6 | 2 | 0 | 1 | 0 | |

Information about the care home

| | |
|-----------------------|------------------------------------------------------|
| Name of care home: | Visions |
| Address: | 48 Nags Head Hill St George Bristol BS5 8LW |
| Telephone number: | 01179608511 |
| Fax number: | 01179608511 |
| Email address: | jennywaring@tiscali.co.uk |
| Provider web address: | |

| | |
|--------------------------------------------|-----------------------|
| Name of registered provider(s): | Visions (Bristol) Ltd |
| Name of registered manager (if applicable) | |
| Mrs Jennifer Elizabeth Waring | |
| Type of registration: | care home |
| Number of places registered: | 4 |

| Conditions of registration: | | |
|-----------------------------|-----------------------------------|---------|
| Category(ies) : | Number of places (if applicable): | |
| | Under 65 | Over 65 |
| learning disability | 4 | 0 |

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|
| Conditions of registration: | | | | | | | | |
| The maximum number of service users who can be accommodated is 4. | | | | | | | | |
| The registered person may provide the following category of service only: Care Home only - Code PC to service users of either gender whose primary care needs on admission to the home are within the following category: Learning disability (Code LD) | | | | | | | | |
| Date of last inspection | | | | | | | | |
| Brief description of the care home | | | | | | | | |
| Visions is a detached house in a residential area of Bristol. It is on a main road set back via along garden and a series of steps. It is close to local shops and bus routes to the centre of Bristol. The house has been refurbished by the owners to create an attractive home for the residents. It has four available bedrooms for service users. Two of the bedrooms are on the first floor and these have an en-suite bathroom. The two | | | | | | | | |

Brief description of the care home

bedrooms on the ground floor have an en-suite toilet and sink. There is a bathroom on this floor for these service users and the staff team. Downstairs there is a kitchen, which leads to the garden. This area is grassed with some decking and paving. There is also a dining room and lounge. The office is on the ground floor.

The aim of the service, as detailed in the statement of purpose, is to support young adults with learning difficulties to develop and achieve independence. The weekly fees at the time of inspection were #890.00.

What we found:

This was an unannounced random visit. The purpose of the visit was to review the requirements from the previous visit and monitor the quality of the care provided to the individuals living at Visions. The last visit to the service was a key inspection on the 14th April 2008.

Whilst there have been no additional visits to the service, we completed an annual service review in April 2009. The outcome of the review was that we judged the service to be continuing to provide good outcomes for the people they support.

This visit was planned using information we have received over the last twelve months. This included an annual quality assurance assessment completed by the provider. This gave us information relating to the National Minimum Standards on progress made since the last visit and some statistical data.

The visit was conducted over 4.5 hours. An opportunity was taken to speak with the registered manager/provider, a member of staff and two of the individuals living in the home. Records were viewed in respect of the care provided to the individuals, staff records including recruitment and training and a tour of the home.

All requirements were met from the last visit as evidenced previously in the annual service review. The statement of purpose has been updated to include all areas as detailed in the National Minimum Standards. Individuals have a current contract of care detailing the fees that were being charged. Risk assessments have been updated to reflect the risks to the individual and what safeguards are in place. This includes individuals who self medicate. Evidence was provided that all staff including bank staff receive regular supervision. There were two recommendations relating to risk assessments requiring more information about the degree of risks to individuals and references for staff to be followed up by a telephone call, the service has responded appropriately to both.

At the time of the visit there were three individuals living in the home. One person has left in the last twelve months. The manager discussed how they were liaising with the local placing authorities and commissioners to try and fill the vacancy. From talking with the manager it was evident that they would involve the people already living in the home ensuring that the new person was compatible. This would include trial visits and obtaining as much information about the person to inform the assessment ensuring that the service could meet the needs of the new person.

Care records were viewed for two individuals. Each person had a file containing current information about the individual enabling staff to support them in a person centred way. Plans of care were generated from a care management assessment. Files contained copies of the placing authority's assessment and care plan. Information was person centred and detailed what was essential to the individual.

Information had been reviewed involving the person, their relatives and other professionals where relevant. The service is commended on how they have made information accessible to the individuals living in the home. This included the use of

symbols, plain English and photographs.

From talking with staff and individuals living in the home it was evident that people were involved in making decisions about how they spend their time. Individuals are supported to attend college, day centres, work placement, social networking groups, planned trips to places of interest, trips to the local shops and pubs and to take annual holidays. Each person had a structured activity plan.

On the day of the visit, one person was being supported to attend college and another was going out for lunch and a shopping trip. The third person was at a local day centre. Staff said the individuals assist in the planning of the day.

One person was observed being involved in the cleaning of their bedroom it was evident they were enjoying what they were doing and the one to one support from the member of staff. The individual said they liked living in the home and the staff that supported them. The individual said they were planning a holiday to Spain and had previously been to Butlins. From talking with the individual and the manager it was evident that annual holidays were tailored to the individual.

All the individuals have contact with family who take an active part in the life's of the individuals. Social events are organised and relatives and local neighbours are invited. It was evident from talking with the manager, that the individuals are very much part of the local community with good links being nurtured. Weekly trips were organised to the local public house.

Care plans included a Health Action Plan detailing the support the person required to ensure they stay healthy. Clear records were in place detailing appointments attended and the outcome. Where relevant the manager was liaising with other professionals including the local Community Learning Disability Team, Consultant Psychiatrist and other health professionals ensuring the care needs of the individuals were being met. Individuals had access to a GP, dentist and optician with routine appointments being maintained.

The medication system was viewed to ensure that individuals are protected. Good systems were in place including clear records, medication audits and a medication procedure. Staff competence was being routinely checked and all had attended recent training as seen on staff training files.

The Annual Quality Assurance Assessment completed by the provider prior to the visit indicated that there had been no complaints. One of the individuals living in the home indicated that if they were unhappy they would talk to the manager/provider.

Finances were looked at for two individuals. Good procedures were in place to protect the individual's finance. Daily checks were being completed on money held in the home, receipts were being kept and two staff signatures were obtained for all financial transactions. A recommendation would be that where able individuals sign for their own financial expenditure as this was not in place.

An opportunity was taken to tour the home and three of the bedrooms. All areas were clean, homely and comfortable. There was an ongoing maintenance and decoration programme in place. The kitchen was being decorated at the time of the visit. The

manager said that three of the bedrooms were going to be redecorated during the summer months.

Sufficient staff were working in the home. The home is staffed with a minimum of one member of staff, however at peak times during the day additional staff are employed to assist with social activities. The manager said that two of the individuals stay with relatives on alternate weekends. The home is staffed 24 hours with a member of staff providing sleep in cover at night in the event of an emergency. One of the individuals confirmed that there was always staff available enabling them to go out or to support them in the home.

Recruitment information was seen for four members of staff. It was evident a thorough recruitment process had been completed. This included a full application, records of the interviews, two references and a criminal record bureau disclosure. The manager confirmed they would only employ a person if the appropriate checks had been completed in accordance with the National Minimum Standards and the Care Homes Act. One members of staff's references could not be located although the manager said that she had received them prior to employment. Reassurances were given that these would be located.

From the Annual Quality Assurance Assessment, Visions employs three permanent members of staff and five bank staff who cover the additional shifts. There was a commitment from the manager to ensure that the home was staffed with competent and familiar staff. There was a comprehensive induction and training package in place for both the permanent and the bank staff. Compliance has been demonstrated to ensure that the bank staff receive regular supervision. Meetings were being organised on a monthly basis with records being maintained.

There was a good rolling programme of training including statutory health and safety training, first aid, manual handling, food hygiene and fire training. All staff have attended training on safeguarding vulnerable adults from abuse. This was being updated for all staff with the local council. Other training included epilepsy, Mental Capacity and Deprivation of Liberty, Equalities, Sexuality and Relationships, Diabetes to name a few. It was evident the training was planned around the needs of the individuals.

There was a commitment to ensure that 50% of the workforce have an National Vocational Qualification (NVQ) in accordance with the government agenda for care. Four of the staff have a National Vocational Award at level 3, with the manager having an NVQ 4 in care and management. A senior carer was in the process of completing an NVQ 4 in management.

Staff complete the learning Disability Qualification as part of their induction. However the manager said there have been some issues with the provider of this service out of the home's control. The manager said this was still in the process of being resolved.

There was a good quality assurance system in place including obtaining the views of the people they support and relatives. Feedback from the surveys was positive. The provider also has an external person visit the home on a monthly basis to monitor the quality of the service and speak with both the staff and the individuals living in the home. They also looked at systems to measure the quality of the service with reports being maintained.

Two individuals spoken with during the visit indicated that they were happy living in the home. One member of staff said they enjoyed working with the individuals and found the management to be very supportive and proactive in enabling the people to lead positive lifestyles including accessing the local community and a commitment to individualised care. From talking with the staff and the manager it was evident they were knowledgeable about the people they support with good relationships being developed.

What the care home does well:

Visions provide individuals with care that is tailored to their individual needs. Individuals are involved in the planning of their care.

There is a commitment to providing meaningful activities and individuals can choose how to spend their time.

Individuals are encouraged to be independent both in the home and the local community.

There are good systems in place to support the staff including ongoing training, team meetings and supervisions. There is a stable core group of staff working in the home.

The home is well managed with good consultation with the people they support, relatives and staff.

What they could do better:

It is recommended that where individuals are able, that they sign their financial records.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

| No. | Standard | Regulation | Requirement | Timescale for action |
|-----|----------|------------|-------------|----------------------|
| | | | | |

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

| No. | Standard | Regulation | Requirement | Timescale for action |
|-----|----------|------------|-------------|----------------------|
| | | | | |

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

| No. | Standard | Regulation | Requirement | Timescale for action |
|-----|----------|------------|-------------|----------------------|
| | | | | |

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

| No | Refer to Standard | Good Practice Recommendations |
|----|-------------------|-------------------------------------------------------------------------|
| 1 | 22 | Where possible individuals to sign for their own financial expenditure. |

Reader Information

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| Document Purpose: | Inspection Report |
| Author: | Care Quality Commission |
| Audience: | General Public |
| Further copies from: | 0870 240 7535 (telephone order line) |

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Adults (18-65 years) can be found at www.dh.gov.uk or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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