

St Peter's Hall Limited

St Peters Hall

Inspection report

52 St Peters Road
Handsworth
Birmingham
West Midlands
B20 3RP

Tel: 01215234123

Date of inspection visit:
15 August 2018

Date of publication:
07 September 2018

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

The inspection took place on 15 August 2018 and was unannounced. St Peter's Hall provides residential accommodation and support for up to 12 adults with mental health needs. People were supported to living independently with each of the 12 units having its own kitchen, bathroom and bedroom areas. At the time of our inspection 12 people were living at the home. At the last inspection on 21 August 2015, the service was rated as Good. At this inspection we found the service remained Good.

There was a registered manager in place. 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 for this service is also the registered provider.

At the last inspection in August 2015 we rated the key question 'Is this service well led?' as 'Requires improvement.' At this inspection the service had improved to now be rated as good. The provider had systems in place to review and update people's care and to assure themselves of the quality of care being delivered. Where areas had been identified for improvement, actions had been taken. People said the service was well managed and staff felt supported by the management team to provide good care.

People continued to receive care and support from staff who understood how to keep them safe. Staff were available to meet people's needs and understood how to best support people and the risks to their health. Staff understood how to protect people from abuse and were clear about the steps they would need to take if they suspected someone was unsafe. People were supported by staff to have their medicines as prescribed and checks were made to ensure staff supported people with their medicines appropriately.

The service continued to be effective. Staff said training helped them do their job and gave them the right skills to meet the needs of the people they supported. They were supported by the management team through regular supervisions and staff meetings. Staff understood they could only care for and support people who consented to being cared for. People were supported to prepare their own meals which reflected their individual preferences. People told us staff responded when they were unwell and arranged health appointments on their behalf if they asked.

The service remained caring towards people. People said staff were caring and treated them with dignity and respect. People were involved in how their care and support was received; they were given choices and said their wishes were respected by staff.

The service remained responsive. People received care that met their needs. Staff provided care that took account of people's individual needs and preferences and offered people choices. People said staff listened to them and they felt confident they could raise any issues should the need arise and action would be taken.

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? The service remains Good.	Good ●
Is the service effective? The service remains Good.	Good ●
Is the service caring? The service remains Good.	Good ●
Is the service responsive? The service remains Good.	Good ●
Is the service well-led? The service has improved to Good. The management team ensured regular checks were completed to monitor the quality of the care that people received, and action had been taken where areas were identified for improvement. People and staff were positive about the overall service. Staff felt supported by the management team and were clear on their roles and responsibilities.	Good ●

St Peters Hall

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 and took place on 15 August 2018 and was unannounced. The inspection was completed by one inspector.

As part of the inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us by law. We also contacted the local authority and Healthwatch about information they held about the provider. Healthwatch is an independent consumer champion, which promotes the views and experiences of people who use health and social care services.

We spoke with six people who lived at the home and one relative. We also spoke to two healthcare professionals by telephone, one whilst at the home and a second following the inspection. The registered manager was not available on the day of the inspection therefore we spoke with two deputy managers, a third in charge carer and a senior carer. We also spoke to one night support carer by telephone following the inspection.

We looked at the care records of four people, three staff recruitment files, the resident and staff survey from January 2018, medication administration records (MAR) and checks made by the management team to monitor the quality of the service provided and the actions they took to develop the service further.

Is the service safe?

Our findings

At the last inspection on 21 August 2015, we rated this key question as 'Good.' At this inspection the rating remains unchanged.

People told us staff supported them to stay safe. Staff we spoke with understood how to keep people safe and had received training which included recording and escalating their concerns to senior staff.

Staff we spoke with knew the type and level of assistance each person required. We viewed four care plans and saw risk assessments that guided staff on the individual risks people lived with and staff we spoke with knew the support needed to minimise risks.

All six people we spoke with told us that staff were available to them to provide support. One person commented, "Staff are always there for you." Staff also confirmed there were enough staff to meet the needs of the people they supported. They told us when staff were off work, cover was provided from within the team. One member of staff said, "It's good teamwork here, and the managers are always available to cover too if needed."

Recruitment processes demonstrated how checks were made on the suitability of staff before they commenced work at the service. Whilst the provider had made reference checks with previous employers and with the Disclosure and Barring Service (DBS); they needed to strengthen the process further and ensure a full employment history was completed for all staff. The deputy manager said this would be actioned immediately following our inspection.

People we spoke to told us they got their medicines when they needed them. One person told us, "Staff look after my meds, it's all done for me." Another confirmed they got their medicine, "As I need and all on time. When I go out I taken them with me." Staff told us they had received medicine training and the provider also made periodic observations of their medicine support to ensure it met the required standard. Daily checks of the medicine record sheets were made by the management team to ensure staff had correctly recorded the medicines they had given to people. We saw an external pharmacy audit had been completed; no concerns had been identified or areas requiring action.

People were protected from harm by the prevention and control of infection. People told us and we saw that the home was kept clean; people also told us they were encouraged by staff to keep their individual rooms clean. Staff told us there was a good stock of personal protective equipment such as gloves and aprons available to them.

The provider had processes in place to record and monitor any accidents and incidents if they occurred and to look for actions needed to reduce the likelihood of events happening again.

Is the service effective?

Our findings

At the last inspection on 21 August 2015, we rated this key question as 'Good.' At this inspection the rating remains unchanged.

People were supported by staff that understood their needs and how to look after them. One person commented, "Staff are nice and have good knowledge." Staff told us training provided, reflected the needs of people living in the scheme and confirmed the training had enhanced or embedded their current knowledge. For example, one member of staff told us they had received mental health awareness, which gave them a good understanding of ways to support people.

All staff told us they were supported in their role, understood their responsibilities and had regular supervision and team meetings, where they felt able to share good practice. Staff told us they felt able to access advice and guidance on people's care whenever they needed. One member of staff said, "The [registered] manager is very supportive and gives advice. I have learnt lots from them in the time I have worked here."

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 we spoke with understood their right to make choices. One person told us, "I choose, and staff listen."

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 checked whether the service was working within the principles of the MCA and saw that the provider had submitted applications where they had assessed that people were potentially receiving care that restricted their liberty. The registered manager also had a process in place to record the expiry date of any authorisations, we saw that where one authorisation had expired a re-assessment had been made to review the person's care and a new application had been submitted.

People were encouraged to prepare their own meals reflecting their personal and cultural choices. People told us staff would support them to buy their food and they were encouraged to make healthy food choices. One person said, "They help me cook fresh food because it's better for me." The deputy manager told us in addition staff supported people by ensuring that food was stored correctly, within expiry dates and kitchen areas were kept clean.

People's healthcare needs were monitored to make sure any changes in their needs were responded to promptly and people had access to health and social care professionals. One person told us how following a change in their health their GP had been contacted. Relatives told us they were happy with the actions

taken by the staff in monitoring people's healthcare needs. We spoke to two healthcare professionals who both said there was good communication with staff and guidance given to support people's wellbeing was followed by staff.

People's rooms were personalised and reflected their interests and people described the environment as 'homely'. We saw that one bathroom was in the process of being replaced and the deputy manager told us there was an ongoing programme of redecoration in place.

Is the service caring?

Our findings

At the last inspection on 21 August 2015, we rated this key question as 'Good.' At this inspection the rating remains unchanged.

We spoke to six people who all told us, they liked living at St Peters Hall and they were supported by caring staff. One person said, "The atmosphere is good. The staff are good and listen to me." Another person told us, "They [staff] are all nice. I like them." People told us that staff knew how to provide their care in the way they wanted it. One person said, "I've lived here a long time, staff know me and I know them so everything it's all sorted."

People also told us staff supported them to stay in contact with their family and friends. One person said, "[Staff] support me to stay in contact." A second person told us staff had supported them to visit their family each week. A member of staff also told us how one person was supported to stay in contact with family abroad by using skype calls.

Three staff we spoke with said they enjoyed working with people and had developed good relationships. One member of staff told us, "This is a family run business and we treat clients [people] as our family too. Kindness and respect are important that way people feel able to speak to you." Staff spoke in a caring way about the people they supported. One member of staff said, "I love the people; they are like my own family."

People told us staff were respectful and we made observations that supported this. One person said, "Privacy is good." Another person told us they had a good relationship with staff who they described as, "Respectful." We saw staff were discreet when discussing people's personal care needs. Peoples' personal information and personal files were stored securely. Staff were aware of the need to maintain confidentiality and store information securely.

People told us about how much their independence was prompted and supported. One person said, "[Staff] encourage me to cook and keep my room clean and be independent." Another person told us how staff supported them to be independent and plan their meals and then shop for the ingredients.

Is the service responsive?

Our findings

At the last inspection on 21 August 2015, we rated this key question as 'Good.' At this inspection the rating remains unchanged.

People told us staff understood their needs and they felt comfortable to discuss or share their day to day tasks with them. One person commented, "Staff do listen." Staff told us as a small home they were able to provide individual care to people they knew well. One member of staff said, "It's a small home so we can support people as individuals. [We] know everyone well and are able to see immediately any changes in people's wellbeing."

We spoke to two healthcare professional both of whom confirmed they felt staff knew people well and that staff were responsive to changes in people's wellbeing. One healthcare professional said, "The person I support requires a lot of support and they get that from the home [staff]. There are regular reviews with the home [staff] and they listen to our suggestions."

People were fully involved in care reviews and understood their plans of care. One person told us how they met with staff to discuss any changes in their care. They told us, "In the reviews we look at [my] care plans." Another person commented, "[My] care plan is reviewed... I read and discuss it." Staff told us any changes with a person's well-being would be referred to the management team or healthcare professional for review.

People told us they were supported to enjoy a range of activities. One person said, "There's always lots to do. I enjoy keep fit." On the day of our inspection some people visited a local church day centre during the morning. The weekly keep fit session was then held during the afternoon, which we saw people enjoy in the garden area. The deputy manager said activities were discussed at each residents meeting to ensure people enjoyed them and they reflected people's interests.

All people we spoke with said they would talk to a staff if they had any concerns. One person told us, "Any concerns or questions I can speak to [registered manager's name]." Another person told us they had raised a concern and we saw this had then been discussed at the next residents meeting and action had been taken. All staff and the deputy manager said as a small service they were able to deal with any issues as they arose. Information on how to complain was available to people on the residents' information board.

No written complaints had been received but the deputy manager advised that a policy was in place which would be followed to ensure any learning was taken to reduce the risk of further concerns.

Staff we spoke with knew how to prevent discrimination and promoted equality and diversity at the home. Staff were aware of the individual wishes of people living at the home that related to their culture and faith. One member of staff said, "People are supported as the individuals they are." During the inspection the deputy manager printed and displayed the LGBT rainbow symbol in the main reception area as a way of showing positive support for an inclusive and anti-discriminatory environment.

All care plans we viewed contained advance directive information giving people's wishes for end of life care should this be needed in the future.

Is the service well-led?

Our findings

At our last inspection in 21 August 2015, we rated this key question as 'requires improvement'. We found that some audits were not always completed on time and we had not received required information from the provider, although appropriate contact had been made with other agencies to protect and prevent harm to people. At this inspection we found improvements had been made audits were in place and action had been where required and the provider understood their responsibility to notify us of significant events; therefore, the rating for this question is now 'good'.

People told us they enjoyed living at the home. One person said, "[I am] very happy here...it's good for me." Another person said, "Its well-managed," and a third person commented, "[Registered manager's name] is very good."

We saw that the provider had a series of checks and audits in place to check the quality of the care provided. We saw that where an area was identified for improvement action had been taken. For example, improvements in the environment and medication retraining for one member of staff. The deputy manager had also reviewed care plans to include more information on peoples likes and dislikes. They commented, "The information enables you to build a better relationship with people."

There was a registered manager for the service. 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 for this service is also the registered provider. They were not available on the day of our inspection therefore we spoke to the two deputy managers.

Staff we spoke with told us the home was well organised and run for the people living there. They told us the management team was supportive and they felt able to approach the registered manager with any concerns they may have. One member of staff said, "It's an open door and you can always ask for advice." Another long standing member of staff commented, " Overall all things are good or I wouldn't have been here as long as I have."

The care people received was checked and updated regularly by the management team. We saw there were systems in place to ensure people received the care they needed. The deputy manager told us the results of audits were discussed in staff meetings and all staff were made aware so that any shortfalls were addressed to improve the overall quality of the service. For example, we saw that an issue with cleaning products storage had been addressed at one staff meeting.

The management team had also sent questionnaires to all people living in the scheme in January 2018 asking for their feedback and opinions on the care provided. One person commented, "There are surveys for feedback." A response was made by 10 people and showed that people were happy with the care provided. Where people had made a comment or suggestion we saw the management team had responded.

The deputy manager said the service was supported by other professionals locally, such as GP surgeries and community mental health team. These provided guidance and advice in how to support people's needs and we saw this had been used in support of people's care. We saw people attended a local church day centre and some people were supported by advocates.

The deputy manager said the management team kept their knowledge up-to-date by attending registered managers meeting supported by the local authority and by networking with other local services. They also subscribed to an industry magazine and accessed information via the internet from organisation such as the national institute for health and care excellence (NICE).