

L'Arche

# L'Arche Preston

## Inspection report

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Preston  
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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

L'Arche support people with a learning disability across a variety of housing situations – shared houses, individual flats, and small care homes. L'Arche (Preston) supports people who are tenants within the building with domiciliary care. Support is provided 24 hours a day. There is access to the building for wheelchair users. Car parking facilities are available. At the time of the inspection visit there were four people living as tenants who used the service.

This was the first inspection since L'Arche was registered with the Care Quality Commission (CQC).

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 had procedures in place to minimise the potential risk of abuse or unsafe care. Staff spoken with were able to identify the different types of abuse and had received training in safeguarding adults. We confirmed this by talking with staff and the management team.

Risk assessments had been developed to minimise the potential risk of harm to people. These had been kept under review and were relevant to support and care provided.

People who used the service had their medicines administered in a safe manner and they received their medicines on time. Staff had received related training to ensure medicines were administered correctly by trained staff.

Staff received regular training and were knowledgeable about their roles and responsibilities. They had the skills, knowledge and experience required to support people with complex needs and promote their independence.

People were supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

We found people had access to health and social care professionals and their healthcare needs were met.

Care plans were organised and had identified care and support people required. We found they were informative about support and what care people had received. They had been kept under review and updated when necessary to reflect people's changing needs.

We observed many examples of staff supporting people with a caring, sensitive and respectful approach. In addition comments we received from people being supported and relatives confirmed this. One relative

said, "Excellent staff it has taken a while to get the service up and running but they are wonderful people."

People were provided with support and guidance to meet their aims and goals and be part of the local community. For example attending local colleges and public building events. One staff member said, "We are out and about in the community and involved in learning disability projects that are planned."

We found staff, people being supported and relatives were at the centre of L'Arche's quality assurance programme. The management team had a range of systems to gain their feedback. This included meetings with people who used the service and their relatives. Staff, people who used the service and relatives told us the service was organised and well-led.

The registered manager used other methods to assess and monitor the quality of the service. These included staff meetings, meetings with health and social care professionals and quality audits.

## 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 was safe.

There were sufficient staff on duty to meet people's needs.

The provider had procedures in place to protect people from the risks of harm and abuse. Staff spoken with had an understanding of the procedures to follow should they suspect abuse was taking place.

The provider had risk assessments and they were reviewed regularly so that people were kept safe.

Procedures were in place to ensure medicines were safely administered.

### Is the service effective?

Good ●

The service was effective.

People were cared for by staff that were well trained.

People were provided with choices from a variety of nutritious food. People who used the service had been assessed against risks associated with malnutrition.

### Is the service caring?

Good ●

The service was caring.

We observed staff treated people with respect, kindness and compassion.

Staff respected their rights to privacy and dignity.

People were supported to give their views and wishes about all aspects of life at L'Arche. Also staff had a good understanding of people's needs.

### **Is the service responsive?**

The service was responsive.

Care records were personalised to people's individual requirements. We observed staff had a good understanding of how to respond to people's changing needs.

People were encouraged to pursue their chosen interests to ensure they were stimulated and occupied.

The management team had processes in place for people to follow should they have a complaint or any concerns.

**Good** ●

### **Is the service well-led?**

The service was well-led.

The service had an open working culture and the management team had a visible presence within the home.

A quality assurance monitoring system was in place and regular audits of the service had been completed.

The views of people who used the service, relatives and staff were sought on a regular basis.

**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 was planned to check 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 an announced inspection visit carried out on the 11 May 2017. We gave the registered manager notice because the service supports adults who are often out during the day. We needed to be sure someone would be in.

The inspection visit was carried out by an adult social care inspector.

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 used this information as part of the evidence for the inspection. We also reviewed historical information we held about the service. This included any statutory notifications and safeguarding alerts that had been sent to us.

Although it was difficult to talk with people because of their complex needs, we managed to spend time with three people who used the service. We also spoke with the registered manager, manager and three staff members. In addition we spoke with a relative at the time of the inspection visit. We had information provided to us from external agencies. This helped us to gain a balanced overview of what people experienced living at the L'Arche.

Part of the inspection was spent looking at records and documentation which contributed to the running of the service. We looked at one care plan of a person who used the service, maintenance records, training records and audits for the monitoring of the service. We also spent time observing staff interactions with people who used the service.

We also contacted health and social care professionals. We did not receive any information of concern about the service.

## Is the service safe?

### Our findings

Although we had limited conversation with people who used the service, we asked one person if they felt safe. They said, "Yes all the time." A relative we spoke with told us they felt very comfortable in the fact that their relative was safe at L'Arche. They also commended the staff for their commitment and expertise in making L'Arche a safe environment for people to live.

The registered manager had procedures in place to minimise the potential risk of abuse or unsafe care. Staff spoken with confirmed they had received safeguarding vulnerable adults training. Comments from staff included, "Yes I know the process and who to contact should it be a whistleblowing matter." The service had a whistleblowing procedure and staff we spoke with knew the process to go through should they wish to raise concerns.

The registered manager had systems to monitor and manage accidents and incidents to maintain people's safety. This included records of accidents and how they had been managed by staff. An additional process was completed by the registered manager to ensure any follow up actions had been completed. In the event of any incident/accident the registered manager analysed and reflected upon events to ensure identified lessons were learnt. This was an in-depth audit process of identifying and implementing further control measures to minimise the reoccurrence of incidents. This demonstrated the service was proactive to spot any trends and reduce the risk of similar incidents and keep people safe.

We looked at how L'Arche supported people in terms of staffing levels. We did this to make sure there was enough staff on duty at all times to support people who used the service. The house had a staff team that offered one to one support so that people received appropriate safe care according to their needs. There was an appropriate skill mix to meet the needs of people who used the service. For example staff were trained to care for people who had complex needs. We discussed staffing levels with people who worked for L'Arche and comments included, "Absolutely have enough staff to do the things people want to do." Also, "Yes we have enough staff around that is what is good about L'Arche. We have help when providing personal care and we need more than one person."

Care plans looked at had risk assessments completed and reviewed when any changes occurred. This was to identify the potential risk of accidents and harm to staff and the people who used the service. Records covered medication, environmental and fire safety. We found risk assessments were detailed, personalised to each person's requirements. They provided clear instructions for staff members when delivering support for people.

Environmental risk assessment had health and safety processes. For example, individual Personal Emergency Evacuation Plans (PEEPs) were individual to each person. They were consistent and precise about how people should be supported in the event of a fire.

We looked at recruitment procedures and documentation for staff. All required checks had been completed prior to any staff commencing work. This was confirmed from discussions with staff and records looked at.

One staff member said, "Yes everything was in place and also the induction training was very good." Recruitment records examined contained a Disclosure and Barring Service check (DBS). These checks included information about any criminal convictions recorded, an application form that required a full employment history and references. The recruitment process demonstrated the management team ensured all checks were provided prior to any staff working at L'Arche.

We looked at how medicines were administered. The medicines administration record (MAR) sheets were legible and did not contain any gaps. The registered manager ensured only staff that had been trained to manage and administer medicines gave them to people. Staff we spoke with confirmed this. One staff member said, "Yes only staff that have had training give it out." Each person who used the service had a locked facility in their room that contained their medication. Records showed medication had been signed for. We checked this against individual medication packs which confirmed all administered medication could be accounted for. This meant people had received their medication as prescribed and at the right time.

Specific care plans and risk assessments detailed each person who used the service requirements and agreed support, along with symptom management and potential side effects. Individual documents also assisted staff to understand any impact medication may have on the individual's mental and physical health. The management team completed medication audits to review any administration, record keeping or other errors that might occur.

## Is the service effective?

### Our findings

A relative of a person who used the service told us they were more than satisfied their relative was well cared for and supported. Staff were aware of their responsibilities and were competent in their role. This was due to the training provided and experience of staff at L'Arche.

People were supported by staff who had the knowledge and skills required to meet their needs. For example we found staff training was thorough and staff were encouraged to further their skills by attending courses relevant to their role. One staff member said, "There is no restriction with training [manager] always pushes us to do training courses." Another staff member said, "The challenging behaviour courses have been useful." The service had their own programme of mandatory training that included, moving and handling, safeguarding vulnerable adults and food and hygiene.

Staff were encouraged to further their development and undertake national qualifications that were relevant to their role. For example staff had completed 'National Vocational qualification' (NVQ). One staff member said, "They are very helpful when it comes to training and I will be continuing to improve by doing professional training. I know the manager is very supportive."

Staff received supervision on a regular basis and annual appraisals. Staff we spoke with confirmed this. These were one to one meetings held on a formal basis with their line manager. Discussion at these meetings could include, staff development, training needs and their thoughts on improving the service. Staff we spoke with and records we looked at confirmed there was a programme of supervision sessions with staff.

All staff who prepared food had completed food hygiene training to assist them to maintain food safety standards. Meal times were a casual occasion and everyone was involved with choosing what meals to have and people were encouraged to eat healthy. We observed at breakfast time one person was engaging with staff and chose what they wanted to eat. We spoke with the person who said, "I love the food." Also, one person who lived at L'Arche said, "I had a gorgeous omelette yesterday."

We found people who used the service were assessed to determine if they were at risk of malnutrition. Care plans were in place to assist staff in meeting people's dietary needs. For example one person was consuming a lot of sugary fluids that was potentially a health risk. With the involvement of the person and staff together they implemented a healthier diet and the person was responding well. Staff encouraged people to have some healthy option meals and eat fresh vegetables and fruit. It was clear people had choices of food and were involved in shopping for some of the food. Staff told us of the varied diet on offer to people. There was information about each person's likes and dislikes in the care records and staff were familiar with each person's dietary needs.

We observed people were encouraged to eat their meals independently with assistance if required. Specially adapted cutlery supported people to eat independently. A staff member said, "We do try and encourage people to be as independent as they can and make their own choices when it comes to what to eat and food

to buy."

The management team worked closely with other health and social care professionals to maintain continuity of people's care. They recorded involvement and outcomes to visits and appointments. We found staff and the management team contacted professionals in a timely manner. This included GPs and social workers.

## Is the service caring?

### Our findings

We asked two people who used the service if they liked the staff and if they were treated with kindness. One said, "Yes course I do." During the visit to L'Arche we observed people were relaxed and comfortable with the staff team. Staff interacted frequently and enthusiastically with people who used the service. They treated people with respect and patience. A relative we spoke with about the care staff provided said, "Excellent staff it has taken a while to get the service up and running but they are wonderful, caring people."

When we arrived people who used the service were getting ready for the day ahead and going about their normal routines. We observed staff interacted frequently and enthusiastically with people. People were not left without support and staff were attentive, responding to any requests for assistance promptly. For example one person was having a shower in a new specially adapted chair and two staff members were supporting the person. The person was so happy about the chair in the shower room they asked the inspector to look at it with them. They proceeded to tell us all about how wonderful the chair was.

We looked at the care records and found a person centred culture which encouraged people to express their views and be as independent as possible. For example staff promoted independence by discussing choices with food and activities with each individual. Each person had a communication assessment. This highlighted preferred communication methods and staff adapted according to each individual. There was evidence people who used the service and their relatives were involved in developing their care plans. People's preferences, interests, aspirations and diverse needs had been recorded and care and support had been provided in accordance with people's wishes. This was confirmed by relatives we spoke with.

We found people were supported to lead active and full lives based on what was important to them. For example one person had attended a local college and achieved certificates in courses undertaken. Care records contained people's choices in terms of food, social preferences and hobbies. We spoke with staff and it was evident they were aware of how to use a person centred care approach that supported people to be independent. One staff member said, "I love it here it is all about the persons and their individual lives."

Daily events that were important to people were written down so staff could provide care to meet their needs. They also contained information about people's current needs as well as their wishes and preferences. We saw evidence people's care plans were reviewed and updated on a regular basis. Staff told us they promoted people's independence as much as possible. For example one person enjoyed visiting the local library, this was facilitated by staff.

We observed examples of staff showing respect, patience and kindness when we visited L'Arche. For example we observed staff knocking on doors before entering and always letting the person know who they were. Also when people required support and encouragement to eat their meals staff demonstrated patience and sensitivity. One staff member said, "[Person] does require some assistance with meals, but it is all about prompting and encouraging [person] to be independent."

We found people were supported to lead active and full lives based on what was important to them. For

example care plans of people who used the service contained people's preferences in terms of food, social choices and hobbies. We spoke with staff and it was evident they were aware of how to use a care approach that supported people with a learning disability to encourage them to be independent.

The registered manager had information details about access to advocacy services should people require their guidance and support. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

## Is the service responsive?

### Our findings

By talking with relatives, staff and our observations it was evident people were supported and encouraged where possible to make decisions themselves. In addition to be responsible to make their own choices with help and guidance if required. Although we had little discussion with people who used the service we found they were encouraged to make decisions themselves. This was in terms of choices for the day ahead. For example one person was going to the 'supercraft' day at the church next door. We observed the person was looking forward to the event. Staff interacted with enthusiasm talking about the event and what was going on at the church.

Throughout the day of the inspection visit we observed staff spent time with people to ensure they received support that was centred on them. For example one staff member was about to play a board game at the request of one of the people who used the service.

People had their own activity programme that was flexible to meet the person's needs. Activities provided included, visiting the local library, trampolining, walks, and visits to local parks. People were able to follow their own individual interests. For example two people had attended the local college to further their education. We asked one person how they liked the college and they said, "Yes it was great and I am going back." In addition people were actively involved in church events such as the 'soupercraft' days. One staff member said, "We are out and about in the community and involved in learning disability projects that are planned."

Each person had a hospital passport containing all the relevant information including details of how to support the person and a record of all other professionals involved in their care. This meant if an individual was admitted to hospital, staff had information to assist them in caring for the person.

We found the complaints policy the registered manager had in place was current and had been made available to all people who used the service and their relatives. This detailed what the various stages of a complaint were and how people could expect their concerns to be addressed. The complaints procedure was on display in the reception area of the building.

At the time of the inspection no formal complaints had been made. The registered manager and manager told us they encouraged tenants and families to raise any concerns with them. This was so they could address any issues before it became a complaint. The registered manager informed us this helped ensure any problems could be addressed quickly and action taken. We spoke with a relative who told us they knew the process and had been given information on how to raise a complaint however had not done so.

## Is the service well-led?

### Our findings

We found the service had lines of responsibility and accountability with a management team in place. The management team were experienced and aware of the needs of the people they supported. The registered manager informed us a new manager was going through the registration process with the Care Quality Commission (CQC) to be the new registered manager. We spoke with the manager who had years of experience managing care services and was previously a registered manager.

Staff were aware of the values and expectations of the organisation L'Arche. They told us they were encouraged to promote people's independence, choice and to be part of the local community. All the staff we spoke with were positive about the organisation and the values they held. One staff member said, "L'Arche is worldwide and the purpose was to provide positive support and guidance for people with disabilities to lead independent lives as possible."

Comments received from staff members and relatives were positive about the way the service operated and was managed. One relative said, "I cannot speak highly of the management they run the place so well and it is all about the people who live here." Comments from staff members included, "Great place to work the management are so caring and want to provide a good service to the people who live here. That is just what they do." Another said, "A very good management team makes the place run well."

Staff spoke positively about support they received from the management team. One staff member said, "Everyone works together to provide the best for the people here." Another said, "[Manager/registered manager] are both supported and always willing to help and listen if you have anything to discuss. They make time for you."

We spoke with relatives about their experiences of the service and how the management team kept them informed of their relatives care. They told us they kept them informed of any changes or issues that may occur. One relative said, "They are so good at what they do. I come at any time and they always chat about things and keep me up to date of what is going on."

The registered manager and manager was part of the staff team on duty and supported people with their care and daily support needs. The registered manager told us he had previously known most of the people they supported for many years and in some cases twenty years. This had helped build relationships and they were aware of the needs of people who lived in the supported houses.

The registered manager had procedures in place to monitor the quality of service provided. Regular audits had been completed. These included medication, care plans and incidents and accidents. We looked at incidents/ accidents to individuals who were supported. The registered manager would analyse any trends that may occur and address the issues. This helped to reduce individual risk and keep people safe.

Staff meetings and 'tenant' meetings were held on a regular basis. For example tenant meetings known as a 'house night' took place weekly. This involved the people who used the service and staff having a meal

together and to discuss events, issues and future activities. Staff told us these meetings were useful and helped develop relationships. One staff member said, "We get together and everybody enjoys the night." Minutes of staff and 'tenant' meetings were documented. In addition any issues or suggestions would be looked into and implemented, with the agreement of staff and people who used the service.