

Caretech Community Services (No.2) Limited

The Laurels

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

We undertook an announced inspection on 11 October 2016. We gave the provider 24 hours' notice of our intention to undertake an inspection. This was because the organisation was a small service and we needed to ensure that the people living at the home would be available.

The Laurels is registered to care for up to six people with mental health needs or learning disabilities. At the time of our inspection there were six people living at the service.

There was a registered manager for this service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered providers and registered managers 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.

People said the staff and management team were caring and always treated them with dignity and respect. They explained how staff supported them to achieve their chosen goals which improved their well-being. Relatives told us they were involved as part of the team to support their family member. All the people we spoke with and the feedback collected by the service said how happy people were to be living at the home.

The management team had a clear ethos that people using the service were at the heart of everything they did. People told us they were important to the staff and the management team. They said they were regularly asked their views about if they were happy with the support they received. People who lived at the home had regular meetings where they could discuss any aspect of their support.

People we spoke with said they had support from regular staff who knew them well. Staff we spoke with recognised the different types of abuse. There were systems in place to guide staff in reporting any concerns. Staff were knowledgeable about how to manage people's individual risks, these focussed on supporting people to achieve their goals. People were supported to receive their medicines by staff who were trained and knew about the risks associated with people's medicines.

Staff had up to date knowledge and training to support people living at the home. Staff always ensured people agreed to the support they received. The management team regularly reviewed how people were supported to make decisions. People were encouraged to make their own choices about the food they ate. They explained that they were supported to make their own decisions and be as independent as they could. People and their relatives told us staff would access health professionals as soon as they were needed.

People and their relatives knew how to raise complaints and the management team had arrangements in place to ensure people were listened to and appropriate action taken. Staff were involved in regular meetings and one to one time with the management team to share their views and concerns about the quality of the service. People and staff said the management team were accessible and supportive to them. The staff team were adaptable to changes in peoples' needs and knew people well to recognise when

additional support was needed.

Staff we spoke with said the leadership from the registered manager was inspirational and motivated them to provide quality care for people living at the home.

The management team monitored the quality of the service in an open way. The registered manager ensured there was a culture of openness and inclusion for people using the service and staff. The management team had systems in place to identify improvements and action them in a timely way. The registered manager and the staff team had been nominated through the providers reward system for awards nationally.

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

People were supported by staff that knew how to provide care in a safe way. People benefitted from regular staff that knew them well and managed their identified risks. People were supported with their medicines in a safe way.

Is the service effective?

Good ●

The service was effective

People were supported by staff with up to date training and who were knowledgeable about how to support them. People received support from staff who respected their right to make their own decisions. People made their own choices about what they wanted to eat. People were supported to access health care when they needed to.

Is the service caring?

Good ●

The service was caring

People benefitted from inclusive care from staff. People received caring and compassionate support from a staff team that enabled people to live their lives as they chose. Staff respected people's dignity and worked with people to achieve as much independence as possible.

Is the service responsive?

Good ●

The service was responsive

People were involved in how they were supported by staff who listened and were adaptable to their needs. People were encouraged to follow their aspirations and achieve their goals. People were regularly asked for their opinions on the care they received. People and their relatives were confident that any concerns they raised would be responded to appropriately.

Is the service well-led?

Good ●

The service was well-led.

People, relatives and staff felt supported by the management team. The culture of the service was to focus on each person as an individual and to involve them with all aspects of their care. The provider and registered manager regularly completed checks to aid continuous improvement.

The Laurels

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 which took place on 11 October 2016 by one inspector. We gave the provider 24 hours' notice of our intention to undertake an inspection. This was because the organisation was a small service and we needed to ensure that the people living at the home would be available.

We looked at the information we held about the provider and this service, such as incidents, unexpected deaths or injuries to people receiving care, this also included any safeguarding matters. We refer to these as notifications and providers are required to notify the Care Quality Commission about these events.

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 planned to make.

We spoke with three people, and two relatives. We looked at how staff supported people throughout the day. We spoke with one social worker who regularly supported people living at the home.

We spoke with two staff and the registered manager. We looked at the care records for two people including medicine records, training records and other records relevant to the quality monitoring of the service such as visits from the provider.

Is the service safe?

Our findings

People we spoke with said they felt safe because they were happy where they lived and knew staff well. One person said about the staff, "They have sorted a mobile phone for me so I am safe when I go out by myself." Another person told us, "I feel safe because they [staff] always listen to me." Relatives told us their family member received support to remain safe. A relative said, "They encourage [family member] to be independent safely." Another relative said staff supported their family member's well-being.

The registered manager and staff explained their responsibilities to identify and report potential abuse under the local safeguarding procedures. All the staff we spoke with had a clear understanding of their responsibility to report any potential abuse and who they could report it to. They had a good knowledge of the people they supported and said they would know if people living at the home had any concerns. They told us training on potential abuse and safeguarding concerns formed part of their induction and was regularly updated. This was also reviewed in team meetings to support staff knowledge.

People told us they had discussed their support needs with staff at the home. One person said, "We always work out what I need help with and they help me." This included identified risks to their safety and welfare. For example, the support people required with administering medicines and going out into the community. Staff explained how they managed risks to people while maintaining people's independence as much as possible. One relative explained how staff had supported their family member to gain their independence safely. They went on to say how this person now had their own transport and had taken the relevant tests to be able to achieve this.

People told us they were consistently supported by staff who knew them well. Staff we spoke with said they were an established team that knew people well. Any concerns during their shift would be acted on and passed onto staff during the end of shift handover. One member of staff said, "We always know what's been happening before we start." Staff were aware of how to manage people's risks and these were reflected in the risk assessments for each person. One person had needed specialist equipment and we saw this had been purchased to ensure the person could be monitored safely.

People told us there were always enough staff to meet their needs. One person explained how their home worked with another care home managed by the same registered manager. Therefore there were always enough staff available if people wanted to go out into the community. Staff and the registered manager said they had enough staff to meet the needs of people using the service. Relatives told us there were sufficient staff on duty to meet their family member's needs. One relative confirmed their family member was able to do things they enjoyed with staff support. We saw and staff told us there were staff on duty to meet the needs of people living at the home. One staff member said, "We work with people so they can achieve their goals and wishes."

The registered manager told us staffing levels were determined by the level of support needed by people. This was provided in a flexible way depending on what people living at the home wanted to do. The registered manager ensured there were sufficient, appropriately skilled staff to meet the needs of the people

living at the home. Staff confirmed staffing levels were arranged around the interests of people living at the home and what people wanted to do.

Staff told us they completed application forms and were interviewed to check their suitability before they were employed. The registered manager checked with staff members' previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions. This information supported the registered manager to ensure suitable people were employed, so people using the service were not placed at risk through recruitment practices.

Some people needed support with their medicines. One person told us about their medicines and when they needed to take them. The registered manager said this was discussed with people using the service and they were included in decisions about how they were supported. The registered manager told us they only supported people at the level they needed support. Some people living at the service were independent; or needed prompting, whilst others had full support to take their medicines. People we spoke with were aware of their medicines and involved with decisions about how they were administered. Relatives we spoke with said their family members were supported with their medicines in a safe way.

We saw people's care plans guided staff in how to support people with their medicines. Staff told us that these plans were updated when needed and staff were aware of any changes. Staff said they had received training about administering medicines and their competency was assessed. They explained they felt confident when administering medicines to people. Staff regularly reviewed people's medicine records to ensure that they were completed correctly and that people received their medicines as prescribed. We saw medicines were kept and disposed of in a safe way.

Is the service effective?

Our findings

People we spoke with told us staff knew how to support them. One person said about staff, "They know their stuff." Relatives we spoke with told us staff were very knowledgeable about how to support people living at the home. One relative said, "They [staff] really know how to support people, I can't fault them." The social worker we spoke with explained how staff were skilled and knowledgeable when supporting people with a range of abilities.

Staff told us they had received an induction before working independently with people. This included training, reading people's care plans, as well as shadowing a more experienced member of staff. Staff said they met all the people initially to get to know them. They said experienced staff and the registered manager shared their best practice so people had their needs fully met. They went on to say, they had received training in all areas of care delivery. Staff told us they were confident with how they provided support for people using the service.

Staff explained how they received additional training specific to the people they supported, for example, autism. One member of staff said this training had improved their understanding and practice when supporting people using the service. Staff told us they felt well supported and had regular supervisions and opportunities to review their training needs. They were encouraged to complete training to improve their skills on a regular basis. This training included the Mental Capacity Act 2005 (MCA); staff we spoke explained what this meant for people they supported.

The 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 told us staff always asked for their consent before supporting them. Staff we spoke with told us they were aware of a person's right to refuse their support and explained how they manage this to ensure people's rights were respected. Staff told us they always ensured that people consented to their care and we saw examples of this throughout our time at the home. For example, we saw staff confirming one person was happy to leave for their trip out for the day. Staff were aware of who needed support with decision making and who should be included in any best interests decision for people. The registered manager had an understanding of the MCA and was aware of their responsibility to ensure decisions were made within this legislation. For example, one relative explained about how a best interests meeting had been arranged for their family member when they needed support with a particular decision.

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.

Staff and the registered manager understood the legal requirements for restricting people's freedom and ensuring people had as few restrictions as possible. People living at the home explained they did not have their liberty restricted.

People said they had choice about the food they ate and that the food was good. One person said, "The food is good, I get to choose what I eat and when I eat it." We saw one person wrote their own menu each week, staff told us this was how this person made their choices. Staff told us they promoted people's independence as much as possible. Staff we spoke with said they encouraged people to make healthy choices to ensure they were maintaining a healthy diet with both food and drink.

People told us they received support with their all aspects of their health care when they needed it. One person said, "I always see the doctor when I need to." Staff had involved other health agencies as they were needed in response to the person's needs. For example, people we spoke with told us they attended the dentist and opticians regularly.

Is the service caring?

Our findings

People we spoke with said all the staff were caring and kind. One person explained how they had a passion for a particular sport. They said the registered manager always ensured they could attend relevant games which they really enjoyed. One person said they were happier living at the home than they had ever been. People we spoke with said staff were kind to them and they enjoyed spending time with staff and the management team. Another person said about the staff, "They are all great, they help me if I need it, and if I am okay I know they are still there." A further person told us, "I love living here, the staff team are amazing."

People said they valued their relationships with staff. For example, one person told us about when they wanted to attend an event at very short notice. The person went onto say how staff had come in especially so they could attend the event, which they really enjoyed. Another person said staff would stay out late with them when they regularly attended a late night event. They told us they could stay as late as they wanted to, because staff were happy to accommodate this.

One person explained to us how staff had supported them with their understanding of recent political issues. They said they worked out their own opinion but had a better understanding because of shared discussions. Another person explained how they enjoyed going to church and how this was important to them. They said that staff supported them to do this when they wanted to.

Relatives told us all the staff were very good. They all said they could not think of anywhere better for their family member to be. One relative said, "[Family member] is very settled and staff are really supportive to (staff really support) them to achieve as much independence as possible." They went onto explain how they thought staff regularly "Put themselves out" when supporting their family member. For example, they told us about how the staff team supported their family to follow their family traditions at Christmas. They said this helped their family member to be reassured and feel comfortable at the home. Another relative explained how their family member had progressed since moving to the home. They said their family member was more open and communication had improved greatly.

We saw good relationships between staff and people living at the home. For example, we saw a member of staff going shopping with one person; they said they were excited and looking forward to the trip to their favourite place. The person explained how much they liked going with the staff member and how much fun they always had.

People we spoke with told us they felt that their views were important and listened to. One person said, "I am in control of my life, they [staff] always listen and we work things out together." Another person explained how they could make their own choices and decide where they wanted to go and what they wanted to do. Relatives we spoke with said all the staff worked with their family members to prioritise their wishes and aspirations. One relative went onto say how staff had listened to their family members aspirations and supported them to achieve their goals. For example, supporting them to follow their interest in a sport and make progress in their achievements. This relative explained what a positive effect this had on their family member, they told us, "They are so much happier and fulfilled."

People had strong links with the community. For example, one person told us regularly attended events in the community such as day centres and classes. One person explained how they did some paid work and how they valued how independent this made them feel.

We spoke with a social worker who regularly supported people who lived at the home. They explained how staff were proactive when supporting people to become more independent. They went on to say how staff had an extensive knowledge of local resources. They also told us recognised individual differences and sought ways to improve independence, autonomy and quality of life for each person as appropriate to each person in their care planning.

People we spoke with explained how well staff understood them and supported their needs. For example, one person spoke about their care plan and explained how they had worked with staff to put it together. They said it was all about them and what they wanted to do and how they liked to do it. They also told us staff and the management team would respect what they said and support them to achieve the goals they had set for themselves.

People said staff respected their dignity. One person told us staff supported their independence, "They only help with what I want help with." We saw feedback from one person living at the home about staff, "They respect my privacy and personal space." Relatives said staff always treated them and their family member with dignity and respect. One relative told us, "They have increased my [family members] dignity because they listen and have improved [family members] feeling of self-worth."

Staff we spoke with showed a good awareness of people's human rights, explaining how they treated people as individuals and always listened to people's views. Staff explained how the registered manager regularly worked with staff to support people. Staff we spoke with said they were inspired by how the registered manager supported people and this helped them improve their practice. One staff member said, "[Registered manager] motivates me to deliver quality care." They went on to say they did this by working alongside them and leading by example, ensuring people were at the centre of everything they did. They said he also spent time sharing best practice, and showed them other services to improve their knowledge base.

All the people we spoke with had examples where they had worked with staff to achieve their goals. They were proud of their independence and they all said they felt valued and had control in their lives. For example, one person told us about how much they enjoyed going to the local public house. They explained how much they enjoyed being able to go when they wanted to on their own whilst still feeling safe. They worked with staff to achieve this level of independence. Their relative said how happy their family member was about succeeding with this. All staff we spoke with were passionate about how important the people they supported were and how the management team supported them to focus on each person as an individual.

One person we spoke with showed us the newsletter that was produced by the service across all the providers homes nationally. The person showed us the edition where another person at the home was featured when they had achieved a qualification which enabled them to be independent with their transport. The registered manager explained how this inspired other people using the services to achieve their aspirations.

Is the service responsive?

Our findings

People we spoke with said they were involved in decisions about their care. They told us they were consulted and involved with all aspects of how they were supported. One person said, "We talk about what help I need and we can change things at any time if I don't feel right." People said they were involved in identifying their own needs, made their own choices and their preferences for how they wanted to be supported were met. For example, one person told us about how they were supported with their medicines. They had a good understanding about all their medicines and explained how they could manage their own medicines however they also said help was always available from staff if they needed it.

People told us they knew staff well, and staff knew how they liked to be supported. Staff said they knew people's support needs could change from day to day, and knew people well enough to recognise when they required additional help. People we spoke with said when they needed extra help staff always supported them. Relatives told us staff were adaptable to meet the needs of their family member.

People we spoke with said they were involved in developing their care plans. Relatives told us they had been involved with how their family member was supported from the start of them arriving at the home. They also said staff kept them involved and up to date. One relative said how reassuring their relationship with staff was, they told us, "I have 100% faith in all the staff and [registered manager] they know [family member] so well."

People told us their care plans showed what they wanted to do and how they wanted to be treated by staff. We saw people's care plans focussed on what people wanted to achieve and the steps towards these goals. For example, one person explained how they had identified something they wished to achieve. They then worked with staff until their confidence had improved and they were able to achieve this. Staff we spoke with said they worked with people to ensure care planning was focussed upon each person's life as a whole. This included their goals, skills, abilities and how they preferred to manage their health. One person had identified they wished to improve their health and make healthy choices about what they ate. They said they had worked with support from staff on the steps they needed to take. They also said they regularly reviewed this with their keyworker and were happy with their progress. Their keyworker was the member of staff they chose to have regular time with to review how they were supported.

People told us they regularly discussed their plans with their key worker and reviewed how they were supported and what they wanted to do next. People we spoke with said they would say if they were not happy with something. One person said, "I can say if I am not happy with anything and we can sort things together." All the people we spoke with said they were happy living at the home.

One relative explained how their family member was taking the next step towards living more independently. They went on to say how staff had discussed this with their family member and agreed stages to reach this goal. They said how their family member had grown in confidence through this process and they were confident in the support that had been provided to achieve this step.

People told us they could choose what they wanted to do with their time. Some people did activities together and others chose things to do on their own. People told us they were never bored and always had interesting things to do that they enjoyed. One person explained how they enjoyed attending events in the community. People we spoke with said there were organised activities such as trips out and workshops which they enjoyed attending. They also told us they had regular holidays where they wanted to go. There were also pastimes that were specific to each person such as football and going to the gym. Relatives told us that their family members had interesting things to do with their time which were individual to them. They told us how some people went out regularly to events in the community which their family members always enjoyed. One relative said, "They're always busy, either learning new skills, or attending social activities. They absolutely love it there." One relative told us how their family member regularly visited them at home. They explained how supportive staff were to ensure their family member enjoyed their time with them.

People said they were regularly asked if they were happy with everything during their regular meetings with staff at the home. One person told us if they were not happy then staff and the registered manager always took action to sort out the concern. For example, they told us they had raised an issue with the garden. They went on to say how the registered manager had taken action and listened to them.

Relatives said they were asked to share their views about the service and the quality of care through satisfaction questionnaires. We saw the results of these questionnaires for 2016 were positive. Some of the comments noted were, "I am impressed with every aspect of contact and feedback from staff," and "An excellent run home." We also saw that professionals who supported people living at the home were regularly asked for feedback. Some of these comments noted were, "Extremely well run service," and "People living at the home are always happy and relaxed."

People we spoke with told us they would say if they were not happy with anything. One person said they were happy to speak with staff or the registered manager about any concerns. They said, "They always listen." Relatives said they were confident to speak to the management team if they had any concerns. The registered manager investigated any concerns raised and actioned them appropriately. For example, we saw one complaint had been investigated and resolved in a timely way. There were clear arrangements in place for recording complaints and any actions taken, including lessons learnt to prevent re occurrences.

Is the service well-led?

Our findings

People we spoke with said the home was well managed. They said they could always speak with the management team at any time, and they would always take the appropriate action. People told us they were listened to by the management team and the staff supporting them.

The registered manager knew all of the people who used the service and their relatives well. They were able to tell us about each individual and what their needs were. The registered manager told us it was important that each person was seen as an individual and looked at how they could support people holistically. For example, the registered manager explained how they had supported one person to move into a supported living environment. They had worked with other professionals to ensure the person was prepared for the next step in their independence. Staff had worked with the person to build independence rather than inhibit what people wanted to do.

Staff told us the culture of the service was all about the importance of each person living at the home. They explained how this was emphasised through the ethos of the registered manager through team meetings and their practice discussions. All the staff we spoke with were passionate about supporting people focussing on their abilities, and being responsive and adaptable in how this was achieved. One member of staff said, "We always listen to people and will go that extra bit so they can achieve what they want." Staff said they all communicated well and worked together to support people living at the home.

Staff said they were supported by the management team. They told us they could always speak to someone if they had any concerns. One member of staff said about the registered manager, "We share ideas and he listens to us." Another member of staff said, "I love working here, seeing people happy makes me happy." A new member of staff explained how the registered manager and experienced staff had been inspirational to their practice when supporting people at the home.

Staff told us they had regular one to one time with the management team, when they were able to share information and ideas. They said they felt well supported and listened to as a result of this. For example, one member of staff explained how the registered manager always worked with them to get to know new people living at the home. They said he shared detailed information about people's wishes and desires and they worked with the person to achieve these. Staff told us how any compliments were always passed on so they felt valued and appreciated. Another member of staff said, "[The registered manager] always takes the time to build on our knowledge and skills, and acknowledges what we do well." The registered manager explained that staff at the home had been nominated for a regional award within the provider's services. He also said he had won a regional and national award within the company, for the most inspirational manager. He had been nominated by people, staff and professionals.

The management team completed regular checks to ensure they provided quality care. The registered manager said they had identified where improvements were necessary. For example, we saw there were plans in place to make improvements to the building. There was building work being completed to improve the living area at the home at the time of our visit. One person we spoke with said they were looking forward

to their new living room and had been involved in discussions about the improvements.

Staff told us they always reported accidents and incidents. We saw documentation available for staff which was completed when needed. The management team investigated the incidents to ensure any actions that were needed were made in a timely way. The registered manager explained how they would review through a practice discussion with staff and resolve any on- going actions when needed.

We saw the provider regularly completed checks to ensure people living at the home received quality care. They regularly spoke with people living at the home to ensure they were happy with the service.