

H.W.C.G.S. Care Limited

Segal Gardens

Inspection report

436 Fleet Lane
St Helens
Merseyside
WA9 2NH

Tel: 0174428828
Website: www.segalgardens.com

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04 December 2018

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Outstanding ☆
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

What life is like for people using this service:

Segal gardens has three separate houses; Segal Gardens, Oakwood and Berrybridge. Each house had their own team of core staff to ensure consistency for people living there. People received care and support from staff that knew them extremely well, and had the knowledge and skills to meet their individual needs whilst providing a better quality of life.

The service had worked hard to ensure that people could live harmoniously amongst each other and be supported by staff they felt comfortable with. Through extremely detailed initial assessments the service ensured they were able to provide the right support before moving into the home. People already living in the home were provided with support to prepare them for new people arriving; this helped to provide a smooth transition for all involved.

A holistic approach had been adopted in the assessing, planning and delivery of people's care and support. Care plans were extremely detailed and identified intended outcomes for people. Staff provided excellent care and support that was met in a way people preferred and provided consistent and positive outcomes that exceeded expectations. Staff worked hard to provide a consistently better quality of life for people by supporting them to develop in areas such as communication, social interaction, education and independence. People spoke highly of the support provided and told us how they had achieved improvements in their own abilities, independence and confidence.

People were supported to live enriched lives and do what they chose. Staff encouraged them to be as independent as possible whilst ensuring they remained safe. Risks that people faced were identified and assessed and measures were put in place to manage them and minimise the risk of harm occurring. Staff showed a good understanding of their roles and responsibilities for keeping people safe from harm. Medicines were managed safely and people received medication at the right time. Family members told us they felt extremely confident their relatives were safe.

Staff showed a genuine motivation to deliver care in a person-centred way based on people's preferences. The management team and staff had developed strong, familiar and positive relationships with people and family members. Throughout the inspection the management team and staff were observed to be warm and affectionate towards people and often displayed physical contact that was appropriate and accepting from people. Family members described staff as being extremely caring and that the service 'went the extra mile' for people to ensure they lived a good quality life.

The leadership of the service promoted a positive culture that was person centred and inclusive. Family members and staff all described the management team as supportive and approachable. The management team showed a continued desire to improve on the service and worked closely with other agencies and healthcare professionals in order to do this. Effective systems were in place to check on the quality and

safety of the service and improvements were made when required.

Rating at last inspection: Good (report published 4 May 2016)

About the service: Segal Gardens is registered to provide personal care and accommodation for up to 15 young adults with complex needs. They are located in the Parr area of St. Helens. There were 12 people living at the service on the day of inspection.

This service has been developed and designed in line with the values that underpin Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

This service was safe.

Details are in our Safe findings below.

Good ●

Is the service effective?

This service was exceptionally effective.

Details are in our Effective findings below.

Outstanding ☆

Is the service caring?

This service was caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

This service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

This service was well-led.

Details are in our Well-led findings below.

Good ●

Segal Gardens

Detailed findings

Background to this inspection

The 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.'

Inspection team:

This inspection was carried out by one adult social care inspector for all three days.

Service and service type:

Segal Gardens is registered to provide personal care and accommodation for up to 15 young adults with autism, learning difficulties and mental health issues. They are located in the Parr area of St. Helens.

The service had two managers registered with the Care Quality Commission. This means they and the provider are legally responsible for how the service is run for the quality and safety of the care provided.

Notice of inspection:

We gave the service 24 hours notice of the inspection visit because it is a small service and we needed to make sure that someone would be available.

We visited the service on 23 and 28 November and 4 December 2018.

What we did:

Our plan took into account information the provider had sent us since the last inspection within their provider information return (PIR). We also considered information about incidents the provider must notify us about, such as abuse; and we looked at issues raised in complaints and how the service responded to them. We obtained information from the local authority commissioners and safeguarding team, Healthwatch and other professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection, we spoke with four family members of people living in the homes. We made observations of the care and support provided in all three houses. We spoke with the registered manager, nominated individual and three care staff.

We looked at three people's care records and a selection of medication and medication administration records (MARs). We looked at other records including quality monitoring records, recruitment and training records for five staff and records of checks carried out on the premises and equipment.

Details are in the Key Questions below.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- Individual risks to people had been assessed with the involvement of the person and their family members where appropriate. Care records provided detailed information around people's individual risks in order for staff to keep them safe from avoidable harm.
- Risks to people were continuously assessed and plans reviewed when changes were identified. This ensured appropriate support was provided without placing restrictions on people's lives.
- The service worked closely with other health and social care professionals to ensure that any known/identified risks were planned for prior to people moving into to the home; this included risks that may be presented with people already living there.
- People were protected by staff who understood how to respond to emergency situations both inside the home and whilst out in the community. Management were contactable 24 hours a day seven days a week for people and staff to contact for advice and support.
- People were encouraged to take positive risks to ensure they lived an unrestricted and independent life; the service supported people to engage in activities that may present risks to themselves and others.
- The environment was safe for people living in each of the three homes. Where required the service ensured that specific equipment had been installed to maintain people's safety.
- Regular safety checks were completed on the environment to ensure it remained safe.
- Family members told us they felt their relatives were extremely safe. Comments included "I have complete peace of mind now that [relative] is safe, I don't need to worry about her," "[Relative] is safe as houses here, I don't need to worry about him at all" "I know [relative] is safe at Segal Gardens, the staff are amazing, I can't fault them. I can feel comfortable now knowing he is safe."
- Staff received safeguarding training and had access to relevant information and guidance about protecting people from harm. Staff showed a good understanding of what was meant by abuse and were confident about how to report safeguarding concerns.
- The registered manager kept a record of safeguarding incidents that had occurred. Incidents were dealt with appropriately and action was taken to minimise future incidents occurring.
- Safe recruitment processes were being used in line with the recruitment policy to ensure that staff employed were safe to work with vulnerable people.

Using medicines safely

- Medicines were stored and managed safely by appropriately trained staff. Medication administration records (MARs) were completed correctly and staff had access to information and guidance about how to safely administer people's prescribed medication.
- Staff had access to detailed guidance for people who required medicines to be administered 'as required' (PRN). Where people were prescribed PRN medicines to help manage distressed behaviours, staff ensured these were only administered if all other advised techniques had failed. This ensured that medicines were

only administered when absolutely necessary.

- Records were completed when medication was received into the service, destroyed and returned to the supplying pharmacy.

Staffing levels

- Enough suitably qualified and trained staff were deployed to meet people's needs and keep them safe.
- The service based the amount of staff on the needs of people and only used staff employed by the registered provider to ensure people received support from staff who knew them well and understood their needs.
- The service recruited staff to match the needs and personalities of the people who used the service.

Preventing and controlling infection

- Staff had received training around preventing and controlling the spread of infection and had access to relevant guidance and information about good infection prevention and control. Staff used personal protective equipment (PPE) where required and followed correct guidance in relation to disposal of PPE and other waste products in order to minimise the spread of infection.

Learning lessons when things go wrong

- A record of any incident or accidents that occurred were kept and reviewed monthly to identify any patterns or trends so that lessons could be learnt when things went wrong.
- The registered managers completed a thorough review and analysis of incidents in order to learn how to manage future situations in a more safe and effective way; such as those related to distressed behaviours.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The service adopted a holistic approach to assessing, planning and delivering care and treatment to people. Prior to people moving into the home, the service worked with other health and social care professionals to complete thorough assessments of people's needs to ensure they were able to provide the right support.
- The service took into consideration the needs of people already living in the home and where appropriate included them and family members in the assessment process; this helped to ensure a smooth transition for all involved.
- Assessments of people's care needs were completed in thorough detail and included expected outcomes for people based on their needs and choices in order to enhance people's quality of life.

Staff providing consistent, effective, timely care and supporting people to live healthier lives and access to healthcare services and support.

- Outcomes for people were positive, consistent and regularly exceeded expectations. Through their positive interactions staff had helped provide a more enriched life for people. People had developed in confidence, independence, communication and social interaction. For example people were able to communicate their needs more clearly which promoted a culture of positive behaviours.
- Where some people had previously displayed distressed behaviours, staff applied effective techniques to manage this in order to improve people's quality of life.
- Family members spoke extremely positively about the impact the service had on their relative's lives. Comments included "Within two weeks of moving in I saw a massive difference with [relative], he talks more, we go out together, his life is so much better" and "Staff have helped with [relative's] development. I can have really good conversations with her, her reading skills have improved massively and the wider education has kept her sense of learning alive."
- Staff knew people extremely well and how to best meet their needs. Staff used the training and experience they had received to support people and provide excellent outcomes and a good quality of life.
- Staff recognised how best to meet people's needs and worked hard with other healthcare professionals to ensure needs were met.

Staff skills, knowledge and experience

- The service recognised the importance of continuously developing staff's skills, competence and knowledge to ensure high-quality care. Staff were supported to gain new skills and share best practice.
- Family members told us they felt their relative's needs were met extremely well by staff and helped provide positive outcomes and a more meaningful life. Comments included "Staff are excellent here, they know

[relative] so well and have built really good relationships with her; I know they look after her really well" and "I know [relative] is getting looked after really well, staff cater for every aspect of his care needs; he is so much happier, we laugh and joke together now not like before."

- People received excellent care from consistent staff; Each house had their own team of core staff which meant they received training that was based on the care and support needs of the people they were supporting. This helped to improve people's quality of life.
- Newly recruited staff completed a comprehensive induction which included a period of shadowing other more experienced staff. This gave them the opportunity to get to know people's needs and behaviours before lone working. Staff told us the induction period gave them confidence in their roles and helped enable them to follow best practice as well as effectively meet people's needs.
- Staff felt supported in their role and received regular one to one supervision. Staff told us the on-going support they received enabled them to discuss their work concerns or leaning development when needed.
- The service encouraged people to be involved in staff recruitment by allowing them to be part of the interview process where appropriate.

Supporting people to eat and drink enough with choice in a balanced diet

- People were supported and encouraged to maintain a healthy balanced diet. Staff recognised and placed a strong emphasis on the risks associated with poor food and drink intake.
- People were supported and encouraged to participate in the preparation of meals in order to develop and maintain independence.
- Staff had good knowledge of people's preferred food choices and dietary requirements and ensured these were provided.

Ensuring consent to care and treatment in line with law and guidance

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 can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- Where people were deprived of their liberty, the registered manager worked with the local authority to seek authorisation to ensure decisions made on behalf of people were lawful.
- Where people lacked the capacity to make particular decisions, they were supported to have maximum choice and control over their lives and were supported by staff in the least restrictive way possible.
- Where decisions needed to be made in people's best interests, relevant people were involved and appropriate records had been completed.

Adapting service, design, decoration to meet people's needs

- Technology and equipment was used effectively to meet people's care and support needs.
- The service had installed sensory equipment to some people's rooms to help provide a relaxing, calm and yet stimulating environment. This resulted in positive outcomes for people by reducing levels of anxiety and distressed behaviours.
- Where people required specialist equipment in order to reduce risk to themselves, this had been installed in a way that did not look obvious to others. This helped to ensure people were given the opportunity to live as normal a life as any other person.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Treating people with kindness and compassion and ensuring people are well supported

- Family members spoke extremely positively about the care provided by staff. Comments included "Staff are excellent, they have built such good relationships with [relative] which is difficult as it takes a long time for her to trust people" and "Staff are great, [relative] is happy, they have a laugh together, it's great to see."
- Staff knew the people they were supporting extremely well and displayed positive, warm and familiar relationships when interacting with them. There was a mutually genuine, kind and compassionate relationship between staff and people living in the homes.
- Staff spoke of people with genuine fondness and felt privileged to be supporting them.
- Staff understood and supported people's communication needs and choices; various methods of communication were used to ensure information was made accessible to people.
- People and family members had been given the opportunity to provide information about their lives, important relationships and preferences about how they wanted to be supported by staff. Staff used this information as well as positive interaction, to get to know people and engage them in meaningful conversations.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect and provided compassionate support in an individualised way; people felt listened to. Staff knew how people liked to be addressed and called people by their preferred name.
- Staff provided support and comfort to people who were upset and anxious to help relax them.
- People's right to privacy and confidentiality was respected. Staff ensured they delivered personal care to people in private.
- Records relating to people's care were kept confidential and staff understood the importance of discussing people's care in private.
- People were given choice and control in their day to day lives and supported to maintain their independence wherever possible. Staff were keen to offer people opportunities to spend time as they chose and where they wanted.
- People were supported to maintain and develop relationships with those close to them, social networks and the community.

Supporting people to express their views and be involved in making decisions about their care

- People, along with family members, were encouraged to share their views about the care people received with regular reviews and meetings.
- Staff signposted people to sources of advice and support or advocacy; and provided advisors or advocates with information after getting permission from people.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

Personalised care

- The care people received was extremely person centred and based on their individual needs. Staff knew people's likes, dislikes and preferences well and used this knowledge to care and support people in the way they wanted, such as, how they preferred to spend their time.
- People's needs were identified, including those related to protected equality characteristics, and their choices and preferences were regularly met and reviewed.
- Reasonable adjustments were made where appropriate and the service identified, recorded, shared and met the information and communication needs of people with a disability or sensory loss, as required by the Accessible Information Standard. For example some people's care plans had been written in pictorial format so they had access to relevant information about their care.
- People were supported to access a range of personalised activities and encouraged to maintain hobbies and interests.
- The service created a detailed activities planner so that people knew their daily routines. Some planners had been created in pictorial format to make the information accessible to people with communication difficulties.
- The service had its own on-site gym, jacuzzi, sensory garden and allotment for people to access when they chose to.
- The service was in the process of creating a separate social area to encourage people within the houses to socialise together. The registered manager hoped this would help to further develop people's social skills and confidence and encourage social inclusion.
- Family members spoke positively about the activities people accessed and told us they had seen improvements to relative's lives as a result. One family member told us "[Relative] is always going out, staff are great and they always do what [relative] chooses which is good."

Improving care quality in response to complaints or concerns

- People and family members knew how to provide feedback about their experiences of care. The service provided a range of accessible ways to do this.
- People actively contacted the registered manager and management team in various ways to raise concerns or complaints.
- People were given information about how to make a complaint and the service ensured this was presented in way they could understand.
- Family members were also given information about how to make a complaint and were confident that any complaints they made would be listened to and acted upon in an open and transparent way.
- Complaints that were made were dealt with appropriately by the registered manager and where required were used as an opportunity to improve the service.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

The service was consistently managed and well-led. Leaders and the culture they created promoted high quality, person centred care.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements and leadership and management

- The service was well-led with a clear management structure in place. The registered managers, team leaders and staff understood their roles and responsibilities.
- People and family members felt extremely confident in the abilities of the management team and the leadership of the service. Comments included "[Manager] and [Manager] are really good, the service is extremely well managed and they are both so knowledgeable" and "The service is definitely well-managed, both managers know what they are doing and work really hard for the people living at Segal Gardens."
- The registered managers understood the importance of supporting staff both in their work and personal lives in order to maintain staff well-being.
- Staff felt extremely supported by the registered managers and were confident about discussing any issues and concerns in an open manner.
- Staff described the registered managers as extremely knowledgeable in their roles and told us they worked well together as a management team.

Plan to promote person-centred, high-quality care and good outcomes for people

- The registered managers planned and promoted person-centred, high-quality care and good outcomes for people. Family members spoke highly of the management team and the care and support provided. One family member told us "[Manager] and [Manager's] priority is people being safe, well cared for and happy. [Relative] is really happy here which is a big thing for her. I would fight tooth and nail to keep her here."
- The culture of the service was caring and focused on ensuring people received person-centred care that met their needs in a timely way. It was evident staff knew people well and put these values into practice.
- Staff felt motivated and passionate about making a difference to people's lives. They described the individual houses as calm, homely and a pleasure to work in.
- Staff understood the registered managers' vision and were keen to implement this within the service to ensure that people received the best care possible.

Engaging and involving people using the service, the public and staff and working in partnership with others.

- The service involved people, family members and relevant health and social care professionals in thorough, meaningful discussions about the care. Their views were obtained through regular meetings, reviews and discussions and information obtained was used to improve the service.
- People and family members felt listened to and involved in the care provided. One family member told us "[Managers] always keep me informed of any important changes, they are really helpful."
- The management team and staff worked closely with other partner agencies and community groups to

achieve good outcomes for people. This included working in partnership with external healthcare professionals, commissioners and advocates.

- Staff told us they felt valued, appreciated, encouraged and supported to develop in roles if they wanted to. Staff felt listened to and told us the registered managers regularly provided them with positive feedback about their work.

Continuous learning and improving care

- Quality assurance systems were in place and used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the registered managers and senior staff to identify areas of improvement. Clear action plans were created and tasks were allocated to appropriate staff to complete.
- The service brought in external organisations to assist with the quality assurance process to ensure all key areas were reviewed.
- Learning took place from accidents and incidents and concerns and complaints were listened to and acted upon to improve the service.