

HF Trust Limited

HF Trust - Oxon Vale DCA

Inspection report

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25 February 2019

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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?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service: HF Trust Oxon Vale DCA provides personal care support to people living in supported living houses and bungalows. At the time of the inspection 43 people with learning and physical disabilities used the service. There were three registered managers for this location.

People's experience of using this service:

- People and relatives told us staff were overwhelmingly kind, caring and professional. One person told us, "I love it here. All staff, everybody." Relatives said staff really understood people's needs and cared for them exceptionally well.
- People's fears and hopes were acknowledged and staff showed a commitment to be empathic, a good listener and friendly.
- The three registered managers oversaw the properties that they were in charge of well.
- There were systems to assess the quality of the service provided. Learning from audits took place which promoted people's safety and quality of life.
- The outcomes for people using the service reflected the principles and values of Registering the Right Support. People's care was person-centred and the support people received from staff focused on promoting people's choice and control in how their needs were met.
- People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.
- The principles and values of Registering the Right Support were being followed. People were supported to access the healthcare services they required. Staff had sought guidance and support from different healthcare professionals to make sure they were providing care which met people's health needs.
- The staff had the skills and experience to provide effective care. Staff had received training to provide safe care. For some staff, receiving support through supervision and appraisals had not always happened. One of the registered managers had identified these concerns and was working to ensure all staff received regular support.

Rating at last inspection: At the last inspection the service was rated good (report published 16 October 2016). At this inspection we rated the service good. For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Why we inspected: This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people received.

Follow up: We will continue to monitor the service to ensure that people receive safe, compassionate, high quality care.

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 was safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was exceptionally caring

Details are in our Caring findings below.

Outstanding ☆

Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

HF Trust - Oxon Vale DCA

Detailed findings

Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection team consisted of one lead inspector and an assistant inspector.

Service and service type:

HF Trust Oxon Vale DCA provides support and care to people living in 17 'supported living' settings, so that they can live as independently as possible. People required different levels of support, this might include having support just for the day and evening but not overnight, whilst other people required staff to be available 24 hours a day. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live a full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include, control, choice and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

Notice of inspection:

We gave the service 2 days' notice of the inspection site visit because the three managers were often out of the office visiting the houses that they managed. We needed to be sure that they would be available.

Inspection site visit activity started on 21 February 2019 and ended on 25 February 2019. We visited the office on 21 February 2019 to meet the registered managers and to review care records and other documents relating to the running of the service. On 25 February 2019, we carried out visits to five supported living houses.

What we did:

Before the inspection we reviewed the information, we held about the service and the service provider. We looked at the notifications we had received for this service. Notifications are information about important events the service is required to send us by law. We requested and reviewed a Provider Information Return (PIR) prior to this inspection. 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.

During the visit we looked at seven people's support plans and the medicines and associated records for four people. We checked recruitment for four staff and general staff training and supervision records. We viewed a range of records about how the service was managed. We met the three registered managers and three support workers. We spoke with two people using the service and carried out observations on interactions between staff and people using the service.

After our site visit we received feedback, via email, from three relatives and two support workers.

We also emailed four people who use the service and three people replied with their views on the service. We also emailed five health and social care professionals but did not receive their feedback on this occasion.

Following on from the visit the registered managers also sent us additional evidence.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

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

Systems and processes to safeguard people from the risk of abuse

- People were encouraged to raise any concerns at house meetings, where people could share their views and discuss issues, we saw that safeguarding adults from abuse was talked about. One person told us, "They [staff] keep me safe."
- People were supported by staff that knew how to raise safeguarding concerns. One member of staff told us, "I would firstly report to line manager. If still unhappy, then go to her manager, if still there was no action taken, then I would whistle blow and contact CQC (Care Quality Commission)."
- The provider had safeguarding policies in place and staff completed safeguarding training. The management team reported concerns accordingly. One of the registered managers told us meetings were ongoing with the relatives, staff supporting the person and social care professionals to ensure every person's needs were being met.

Assessing risk, safety monitoring and management

- Staff regularly assessed risks to people's wellbeing, these were recorded and updated on a regular basis.
- People's risk assessments included areas such as risk of choking and epilepsy guidelines so staff would know how to support a person safely. People had Personal Evacuation Emergency Plans in place (PEEPs) to inform staff how people responded when the fire alarm was set off or in the event of a fire and the level of support they needed.
- Staff carried out health and safety checks to ensure people lived in a safe environment. Where we had identified in two properties that not all health and safety checks that should have been completed had been done, one of the registered managers confirmed shortly after the inspection, that they had completed all the necessary health and safety checks and ensured staff had been involved in a fire drill practice.

Staffing and recruitment

- There were enough staff on duty with the right skill mix to keep people safe.
- Agency staff were used when needed and the provider tried to use the same agency staff to maintain consistency. The three registered managers were actively recruiting for new staff to fill the current vacant posts. One member of staff told us, "I feel that the services run very well considering there is a lot of agency use." They went on to confirm a lot of the agency staff have become very important members of the team.
- People were protected against the employment of unsuitable staff as the provider followed safe recruitment practices.

Using medicines safely

- People received their medicines as prescribed and the properties had safe medicine storage systems in place.

- Staff followed good practice by asking people if they were happy for us to check their medicines. The quantity of medicines we counted matched up with the records of the medicines given to people.
- There were clear 'as required' medicine protocols for those people on this type of medicine. This ensured staff knew what signs to look for when considering giving 'as required' medicines to people.

Preventing and controlling infection

- The provider ensured staff were trained in infection control.
- Staff confirmed they were given personal protective equipment, such as gloves and aprons to ensure they supported people appropriately.

Learning lessons when things go wrong

- We saw evidence that staff reflected on their practice and where improvements could be made through the records of incidents and accidents that we viewed.

Is the service effective?

Our findings

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

Good: People's outcomes were consistently good, and people's feedback confirmed this.

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

- The provider and the professionals involved in people's lives ensured people's needs were assessed before they came to live in a supported living setting. This followed good practice guidelines and helped to ensure people's needs could be met.
- People, where possible, and relatives told us they were involved in the assessment and development of support plans. This promoted people to contribute to how they wanted to be supported.
- People's support plans were very personalised, with detailed information on how to effectively support the person. Easy to read versions were being developed to help those people who responded more to basic words and pictures.

Staff support: induction, training, skills and experience

- Staff confirmed they felt supported in their roles and had one to one and group meetings with their line managers. One of the registered managers had identified that some staff had not consistently received support through regular supervision and appraisal. They were taking action to address this.
- New staff went through a detailed induction to the service and spent time with experienced staff to ensure they understood their roles and responsibilities.
- Staff received training on a range of subjects, including those relevant to the individual person using the service. For example, training was provided on, Makaton (a form of sign language for people with limited or no verbal communication) and epilepsy awareness with emergency rescue medicines.

Supporting people to eat and drink enough to maintain a balanced diet

- People's dietary needs and preferences were included in their support plans. Guidance from speech and language therapists were on people's files if this was part of supporting them effectively.
- People were supported by staff to maintain good nutrition and hydration. If required, staff completed food monitoring records to ensure people were eating enough and a well- balanced diet.
- Where possible people were encouraged to go food shopping and help prepare or cook their meals. One person told us, "Always get to choose [meals], favourite is shepherd's pie, love shepherd's pie. I help them [staff] cook."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked well with external professionals to ensure people were supported to access health services and had their health care needs met. We saw staff had regular communication with professionals to share information and to seek advice.
- People were supported to maintain good health and accompanied to health appointments as and when

this was needed. Where people might refuse to attend appointments, or were wary of seeing healthcare professionals, people's support plans gave advice for staff to follow to help people attend check-ups or receive treatment.

- People had hospital passports in place which would give hospital staff guidelines on the person's needs and the support they required.

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.

We checked whether the service was working within the principles of the MCA.

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

- People's rights to make their own decisions were respected and people were in control of their support. Support plans outlined where people might struggle to make decisions for themselves and people, relatives and professionals were involved if decisions in people's best interests needed to be made.
- Staff received MCA training and understood how to support people in line with the principles of the Act. One staff member told us, "It is different for everyone, we help people make daily decisions." A second staff member said, "We have to assume people have capacity to make decisions."

Is the service caring?

Our findings

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

Outstanding: People were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service?

Ensuring people are well treated and supported; respecting equality and diversity

- People spoke extremely positively about the support they had from staff. Comments included, "I am happy, if I weren't happy staff would help" and "I like living here, lots of friends here."
- Relatives were very happy with the care and support people received. Comments included, "I have observed that staff will always talk to her, explain what they are doing and though [person using the service] can only give very limited feedback, staff understand her very much via her eyes and sounds" and "The key worker along with other members of staff organised a themed party for [person using the service] which involved booking a hall, disco, food and decorations all to a high level which was enjoyed by all his friends and family with staff giving up their time to help make it such a success."
- Staff spoke about people compassionately and knew people's needs well. We saw they recognised when people were becoming agitated and anxious and observed a staff member reassure a person and distract them with the aim to make them feel calmer.
- We observed happy and positive interactions between staff and people using the service. People clearly felt relaxed and engaged readily with staff. Staff recognised that people enjoyed doing different activities. One person was encouraged to help prepare a meal, whilst other people were laughing and chatting whilst playing a game via the television.
- Staff went the extra mile in investigating why people might behave in certain ways. For one person, staff took them to see a dentist where they required treatment. Following this visit and a review of the medicines they had been taking for years under a previous provider, the person's behaviour changed and they appeared calmer and less agitated.
- A relative said staff went the extra mile when their family member was being admitted into hospital and did not have an item that they needed to feel comforted. They confirmed the staff went back to the person's home to pick the item up for the person to feel less anxious.
- Another example of where staff went over and above their usual duties was where a person's relative was unwell and the staff member arranged for the relative to be admitted into hospital and stayed with them and the person using the service to reassure them. They supported the person to see their relative and once discharged and back to their home, kept checking to make sure the relative was safe. Throughout this difficult period for the person, the staff team helped the person come to terms with the change in their relative's needs and assisted them to visit the hospital, which was an achievement as the person had a fear of hospitals.

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

- People told us they were involved in making decisions about the support they needed. One person told us, "I am very clear about my support wishes."

- People's support plans clearly outlined how they expressed themselves. In one person's support plan it noted, 'Always repeat what's being said, give information in small amounts.' Details on communication included, 'When this is happening, we think it means, so we should.' This guided staff to think about how each person might communicate their needs.
- People were supported to communicate in different ways including, through using pictures and eye gaze. Eye gaze enables a person with no or little verbal communication to use a computer or communication aid which picks up on eye movement. This then helps the person communicate with others.

Respecting and promoting people's privacy, dignity and independence

- The service applied the principals and values of "Building the Right Support" and other best practice guidance. These ensure that people who use the service can lead a full a life as possible and achieve the best possible outcomes that include control, choice and independence. The provider ensured this happened through staff offering people choices about how they wanted to spend their time. We saw one person had chosen to rest in their bedroom and this was respected.
- Staff advocated on people's behalf and where possible continued to meet their changing needs. For example, one person had been in hospital and some healthcare professionals felt they would need to move on to a different type of care setting. However, staff worked with the various professionals and helped the person move back to their home. As they had been settling back in, their skin had improved and staff had been actively seeking ways to engage in different ways with the person, monitor their needs and ensure they were happy being in familiar surroundings.
- People had the choice to live where they wanted to. One person did not enjoy living with other people and it was identified that they would benefit from living alone with staff supporting them. This was planned and arranged all with the person's involvement. They visited the potential new home, chose household items and engaged in social activities, which they had avoided doing before. The change in where they lived significantly improved their life, helped them with their relationships with their relatives and staff and ensured their preferences were promoted.
- People were supported to be as independent as possible. For some people they did not require staff to be based during the night in their homes. People had access to an alarm which they could use which would alert staff, who were usually in the building next door, that the person needed assistance.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The staff team promoted the principles of "Building the right support". This is a national plan to build more community services for people with learning disabilities, ensuring they had the opportunity to be involved in how they lead their lives. We saw that people were supported to have positive and meaningful everyday lives through access to activities and services such as, employment, social and sports/leisure activities. They were helped to develop and maintain good relationships with their family, staff and others who lived in the service.
- People were supported to take part in the activities they enjoyed. A relative told us, "The staff are brilliant they always have [person using the service] best interests at heart. They take her on holidays and arrange wonderful treats on birthdays and do a great party at Christmas."
- People were supported by staff who really understood their likes and interests. One person was helped to go on a horse riding holiday as they loved horses and had never had this type of holiday before.
- Staff identified that some of the people who used the service liked going to the cinema. However, they were not able to go as often as they would like due to the financial implications. Staff supported people to get a discount card which helped them to access the community more and have variety in their life.
- The provider had identified people's communication needs. Staff understood the Accessible Information Standard and people's communication needs were highlighted in their support plans. Staff could tell us how different people expressed themselves and how staff took time to listen to people, note the sounds they made and looked at their body language.
- Different technology was in place to ensure people were safe and staff could respond quickly to any changes. For example, one person had an epilepsy bed alarm which would trigger if the person was having a seizure so that staff could support the person without delay.
- There was good communication between the different services that people used. For one person there was a communication book for staff to use both where the person lived and the day service so important messages were recorded.

Improving care quality in response to complaints or concerns

- People and relatives said they would talk with staff or one of the registered managers if they had a complaint. One relative confirmed their recent complaint was currently being treated "Seriously and professionally."
- The provider had an easy to read pictorial complaints form for people to use.
- The provider had systems to manage complaints and the records reflected any issues received were recorded, investigated and responded to as per the provider's policy.

End of life care and support

- The registered managers informed us no people received end of life support at the time of our inspection.

People's end of life wishes were documented, if people and their relatives wanted this noted. We saw for one person their end of life preferences, whilst for others it was recorded that they did not wish to talk about this subject.

Is the service well-led?

Our findings

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

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

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered managers monitored the quality of the service provided. The registered managers were proactive in responding to the areas we identified as needing to be improved and took action to implement a new way of auditing to ensure systems were always effective.
- A range of audits were conducted by the registered managers that included, monitoring when people's records needed to be reviewed, checks on health and safety, medicines and the day to day running of the service. Additional audits were carried out by the provider.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; Continuous learning and improving care

- People and relatives spoke highly of the registered managers and how the supported living settings were run professionally.
- Each of the three registered managers managed a group of settings. Since the last inspection, the service had grown, taking on more settings and providing support to new people. Time was being taken to get to know the people and ensure their needs continued to be met.
- The registered managers promoted continuous learning, they held regular staff meetings to discuss people using the service, work practices, training and staff's well-being.
- People were supported by staff who were supported and trained to offer quality person centred care. The provider had implemented a learning and development programme that gave staff practical skills. Training included positive behaviour support, autism awareness and supporting people to communicate.
- The registered managers had been in post for several years which contributed to the stability and continuity of the service. They had relevant leadership and management qualifications and kept up to date with best practice through the support and guidance of the provider and by receiving updates from the Care Quality Commission and Skills for Care, (a national organisation offering guidance and training for staff and providers working in social care).
- The provider was a member of various organisations to keep up to date with current guidelines. This included, the British Institute for Learning Disabilities (BILD), Voluntary Organisations Disability Group (VODG) and the provider had signed up to STOMP (Stopping Over Medication of People with a Learning Disability, Autism or both.)

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered managers involved people in various ways. People had opportunities to attend house meetings, reviews meetings and could talk with staff. People all named certain staff they would discuss anything with and the interactions we saw showed people felt comfortable around members of staff.
- The provider sent people's relatives satisfaction surveys. We saw the results from 2018, where feedback on how people were supported was positive. The provider then summarised the findings and these were given to the relatives so they could see where the service was working well and where improvements needed to be made.
- Staff told us they felt listened to and able to contribute to the running of the service. One staff member confirmed the "Communication between the provider, managers and staff were good."

Working in partnership with others

- Records showed the registered managers and staff worked closely in partnership with multidisciplinary teams to support safe care provision. Advice was sought and referrals were made in a timely manner which allowed continuity of care.
- Detailed guidelines from healthcare professionals ensured the staff supported people well to achieve the best possible outcomes.