

Aurora LD Limited

Aurora Hyde Lodge

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Good 

Summary of findings

Overall summary

The inspection took place on 13 February 2018 and was unannounced. This was the first inspection of the service under its current provider. The service had previously been inspected with a different legal entity providing the service.

Hyde Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Hyde Lodge accommodates eight young people with learning difficulties in one adapted building. The care service has been developed and designed in line with the values that underpin the 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.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The service provided outstanding care and support to the young people at Hyde Lodge. Staff were exceptionally caring and often went above and beyond the expectations of their role to provide valuable experiences for the young people. Staff and the young people worked hard on maximising their independence and had specific, tailored programmes in place to achieve this. Relationships with family and loved ones was fully supported and encouraged. Staff worked hard with one person to ensure they could attend an important family event, meaning the whole family could be together on the special day.

The service was outstanding in the opportunities provided for the young people. They took part in a number of enterprise schemes to raise money for new equipment for the house. These schemes were fully inclusive and each young person was given opportunity to contribute. The young people were then given opportunity to decide how to spend the money they'd raised. The activity programme took account of people's cultural needs and tailored to each individual's hobbies and interests

Young people were encouraged and empowered to share their views and opinions. Staff achieved this through using communication methods such as symbols, pictures and objects of reference. The principles of the Mental Capacity Act 2005 were embedded in to practice so that the young people were able to take part in decision making as far as they were able to.

Staff were very well supported and the training programme was innovative and tailored specifically to the needs of staff and the young people they supported. New staff took undertook the Care Certificate and any

particular training necessary to enable them to support the young people safely

People received effective care that met their health needs. Staff understood and knew how to manage the young people's complex health conditions. Staff worked well with healthcare professionals to deliver their advice and programmes of support. This included for example, exercises provided by the physiotherapist. There was a small team of staff working across all shifts with each young person. This meant they knew the young people and their needs very well and could work effectively with them to meet their individual goals.

The service was well led. There was a registered manager in place supported by shift leaders. Staff felt well supported able to report any concerns or issues. Staff told us they worked well together as a team and that communication was good. There were systems in place to monitor the quality and safety of the service provided.

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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. The young people received one to one staffing in order to support them safely.

There were risk assessments in place to guide staff in providing safe support.

Staff understood how to protect people from abuse.

People received safe support with their medicines.

Is the service effective?

Good ●

The service was effective.

The principles of the MCA were fully embedded in to practice.

Staff received training and support tailored to the specific needs of the young people they supported.

Staff worked with healthcare professionals to meet the young people's health needs.

Young people received support with their nutritional needs.

Is the service caring?

Outstanding ☆

The service provided outstanding care. Staff went above the expectations of their role to provide the young people with a high level of care.

Young people's independence was fully encouraged. There were specific programmes in place to support this and a fully self contained flat that could potentially support a person to transition to a supported living setting.

Families and loved ones were fully involved with the service.

Is the service responsive?

Outstanding ☆

The service was outstanding. Young people were able to take part in a range of enterprise schemes which empowered the

young people to purchase items for the house.

Staff understood when the young people may want to express their concerns in non verbal ways.

There were clear person centred support plans in place.

Is the service well-led?

The service was well led.

There was a registered manager in place supported by shift leaders.

There were systems in place to monitor the quality and safety of the service.

The young people and staff were able to contribute their ideas and opinions

Good ●

Aurora Hyde Lodge

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 inspection took place on 13 February 2018 and was unannounced.

The inspection was carried out by one Adult Social Care Inspector.

Prior to the inspection we review all information we had available to us. This included the Provider Information Return (PIR). The PIR is a form completed by the Registered Manager describing what the service does well and any improvements they plan to make.

As part of our inspection, we received feedback from four families. We spoke with four members of staff as well as the registered manager. We reviewed support plans for three young people and looked at other records relating to the running of the service such as quality monitoring documents.

Is the service safe?

Our findings

The service was safe. One family member commented on how they had been given ID to wear when they attended the house. This helped reassure them that the young people were safe. We noted that the registered manager checked our ID badges when first arriving at the service. There was also a gate with a code pad attached to ensure the premises were secure. The young people weren't able to talk to us directly about how safe they felt, however it was clear that they were content and happy with the staff supporting them. Demonstrating this through their smiles and being content to sit in close proximity to staff.

All of the young people at Hyde Lodge had one to one support in place. One person had two staff members supporting them due to their particular needs. There was a small team of staff allocated to working with each individual across all the shifts. This ensured that people were familiar and content with the staff supporting them, and staff understood how to support them safely. Staff told us they had received training to enable them to know what to do in response to people's medical conditions. For example, staff said that they weren't allocated to work with a person with epilepsy until they had been trained and assessed as being able to support the person with this condition. The registered manager told us that the staff team had been stable over the last couple of years and they had not had to use agency staff to cover any shifts.

When new staff joined the service, checks were undertaken to minimise the risks of unsuitable staff working with the young people. A Disclosure and Barring Service (DBS) was carried out; this check identifies people who are barred from working with vulnerable adults and gives information about any convictions the applicant has. References from previous employers were sought and employment history reviewed.

Staff understood the importance of the safeguarding process and felt confident about reporting concerns if they had them. Though none of the staff reported being concerned about the welfare of anyone they supported. Staff knew where to find relevant policies and procedures for safeguarding should they ever need to refer to them. Staff also told us they would report concerns to other organisations such as the Care Quality Commission or the police if they needed to.

People received safe support with their medicines. The storage of people's medicines had been moved to their own rooms to personalise the administration process as far as possible. We saw how medicines were stored securely in locked cabinets so that only people authorised to do so would have access to them. Weekly checks took place to ensure medicines were being administered safely. The administration of medicines was recorded on Medicine Administration Records (MAR). We viewed a sample of these and saw they had been completed accurately.

The young people had clear risk assessments in place to ensure staff were able to support them in a safe and non restrictive way. For example, for one young person their risk assessment specified that they should always have their wheelchair when outside of the home as they were able to walk short distances but tired quickly. For another young person who had used bedrails, the risk assessment specified that the bed was regularly serviced. Each young person also had their own evacuation plan in place, should they need to be supported to evacuate the building in an emergency.

The house was clean and free from odour and there were suitable supplies in place to ensure good hygiene was followed.

Is the service effective?

Our findings

The service was highly effective at meeting young people's needs. Staff were well supported and trained. There was a day each week dedicated to training and staff commented on how fortunate they were to have this opportunity. The regular one day a week of training reflected a true commitment to ensuring staff had the skills and abilities to provide highly effective care and support. In recent weeks the training had included topics such as autism and Percutaneous Endoscopic Gastrostomy (PEG) training. The registered manager looked for innovative ways of delivering training to maximise its effectiveness. They told us that staff had recently completed moving and handling training in the swimming pool, using the equipment themselves, so that they were able to empathise and understand how it felt for the young people using this equipment. The registered manager told us that outside of the mandatory training topics, the content of training was very much chosen and led by staff. For example, staff had requested more information about the young people that they did not necessarily work with on a daily basis. In response to this, staff working with a particular person worked together to produce a presentation for the rest of the staff outlining important information about the person and important information to know when supporting them.

The housekeeping staff carried out training with new staff so that they were able to work in a consistent way with the young people when supporting them to cook. This was particularly important for this group of young people who needed a consistent approach and clear instructions. The registered manager explained that when new staff joined they all completed food hygiene training but weren't necessarily confident cooks and so this approach helped them work effectively. The approach to training at Hyde Lodge was highly tailored to meet the specific needs of the young people there.

When new staff joined the service they completed the Care Certificate, this is a nationally recognised qualification that provides staff with the basic skills to be able to provide care. In order to monitor their performance and development needs, staff received supervision both on an individual basis and in groups. One member of staff commented on how much they valued the group supervision sessions as this was an opportunity to discuss any issues that arose across the shift and find solutions as a team.

Staff worked with healthcare professionals to meet people's health needs. An example of this, was a young person who received support from the physiotherapist who had worked with staff on providing a programme of exercises. Staff had committed fully to carrying out this programme and the impact for this young person was significant. The young person's family commented that they were now in the best health they had ever been and described how much better the young person was able to move their arms for example. This would make it much easier for the person in day to day activities such as getting dressed. A range of communication methods were utilised by staff, with the support of the Speech and Language Therapist. We saw how staff in their everyday communication used the support of visual materials, such as pictorial timetables to help people understand what would be happening that day.

The service understood and put in to practice, the principles of the Mental Capacity Act 2005. This is legislation that protects the rights of those that do not have capacity to make decisions for themselves. We saw examples of capacity assessments and best interests decision making. Deprivation of Liberty

Safeguards (DoLS) applications had been made for those young people that required them. Not all of these applications had been processed by the relevant local authority, however the registered manager was monitoring this and in contact with them to check on progress.

The young people were fully involved in helping prepare meals and make choices about what they wanted to eat. Staff used visual prompts to help them make choices. If there were concerns about any young person's nutrition, there were clear personalised plans to support them with the help of relevant professionals. For one young person there was guidance in place to offer a small portion size initially but to have a second helping available should it be needed. The young people's preferences and any dislikes were identified.

Is the service caring?

Our findings

The service offered outstanding care and support to the young adults living at Hyde Lodge. Relatives described care and support in terms such as "wonderful" and "the best". One person told us they were "ecstatic" with the care their loved one received. Another relative commented that the service was "amazing – everywhere should run like this place", and told us it was a "massive weight of their mind" having their loved one cared for there. Another relative said "Hyde lodge is a wonderful home and we are more than happy with every aspect of it"

The young people at Hyde Lodge had a strong voice in expressing their opinions with the support of staff skilled in working with their various communication needs. We saw minutes of house meetings where people were supported with the use of visual prompts to report how they were feeling and to tell the group what activities they had been undertaking. The registered manager told us they rotated leadership of these meetings to ensure that all staff were comfortable in managing the meetings in this way. An advocate also visited the service every six weeks to meet with the young people. An advocate is an independent professional whose role is to ensure that a person's voice is heard and their best interests are being considered at all times. We viewed reports from the advocate demonstrating they regularly visited the young people at Hyde Lodge.

The young people were empowered to understand and express opinions about the support they required. One young person for example, required a minor medical procedure in order for tests to be undertaken. The young person was very anxious about this and so staff created a social story with pictures and symbols to help them understand the test was to help keep them healthy and well. The registered manager explained that in addition to the social story, they had arranged for the nurse to come and visit the young person concerned on number of occasions so that they would become more familiar and at ease with the individual carrying out the test. Although this approach hadn't led to the young person accepting the test that needed to be done, we discussed with the registered manager how it had empowered the young person to express their views and feelings on the subject. For another young person, we saw staff sign two different types of tea which enabled the person to choose which one they wanted. Objects of reference were also used; these are objects that the young person can relate to a particular event to help them understand what would be happening. The registered manager told us that one young person responded well to orange and yellow colours and so they had made pictures on these coloured backgrounds. These means of communication were evident throughout the house to maximise people's understanding of their surroundings and their daily routines.

There was a strong commitment amongst the staff team in supporting the young people at Hyde Lodge to reach their potential and maximise their independence. With the permission of the young person concerned we observed staff working with them on a literacy activity developing their understanding of letters and sentence structure. This person's family told us that the young person had "progressed very well". Staff told us how they hoped to build on these skills to support the person in the future to be able to create their own shopping lists, for example. This in turn would provide further opportunities to develop the young person's independence. Staff working with this person explained how they made specific resources to support the

work they were doing. There was a self contained flat within the service which had been developed around 18 months ago. The registered manager told us this had been developed as a resource to support the young people in becoming as independent as possible and perhaps act as a stepping stone towards the person being able to move on to a supported living placement. The flat contained a kitchen for the young person living there to be able to develop their cooking skills with the support of staff. The registered manager told us that the impact on having this space for the young person living there had reflected in their behaviours. The person concerned used to take themselves outside when they became anxious but had not done this in the last year, reflecting that they were happy and content in their own space.

The service had developed their own living skills programme called HILSP (Hyde Independent Living Skills Service Programme). This was based on work carried out by another provider of a similar service for young people with learning difficulties and complex needs. A tutor was available two days a week to support staff in delivering each young person's programme. One young person, with the support of staff had learnt to clean their teeth. This was a huge achievement for this person and reflected a great deal of commitment and hard work from the young person and staff supporting them. This person's relative told us this achievement was "massive". This relative also told us how staff had worked hard with the young person to manage their emotions on days they were anticipating a visit from their relative. Initially, staff would only be able to inform the young person of their relative coming a few minutes before their arrival due to the emotional response this would prompt in the person. Staff had supported the person over time, to be able to know at the beginning of the day that their relative would be arriving that afternoon. This represented significant progress for this person and helped them to regulate their own emotions around their family visiting. We visited this person with their relative and saw the young person holding the visual resources that staff used to help them understand their relative would be visiting that day.

Staff went to great lengths, often over and above the expectations of their role to support the young people at Hyde Lodge. One family told us how staff had supported their relative to attend a family wedding. This is a situation that would have been very difficult for the young person to manage due to their complex needs. Staff took the young person to the venue on two occasions prior to the big day, to ensure they would be familiar with the surroundings and reduce their anxieties about being somewhere they didn't know. Staff supported the young person on the day and through the evening allowing them to be part of this special family occasion. The family commented "it was so wonderful that he was able to be part of the day and we were able to enjoy it too."

The registered manager told us about another young person who had needed to stay overnight in hospital to have a routine procedure carried out. The young person's carer, without having to be asked, said they would stay with the person during this time to support them through the procedure. The support of a familiar person through this time was extremely important to help them manage the stress and anxiety of being in unfamiliar surroundings.

Our observations throughout the day showed that staff were all kind and caring and it was evident that strong relationships had been built between the young people and staff team. We saw how one member of staff continually offered reassurance during an activity they were carrying out, saying "everything is ok", the person concerned responded well to the calm and reassuring tone of voice used by the staff. We met another support worker and young person and the support worker talked warmly about the person's interests and smiled as they shared that both they and the person concerned were fond of 'people watching' when out and about. We met a young person with both their support staff and relative. The young person was clearly content and happy, demonstrating this through their broad smiles and pointing out things in their room to us.

Families were encouraged to visit at any time and be part of their loved one's life at Hyde Lodge. One parent told us how they were able to stay late in to the evening on the day they visited to ensure their loved one was settled and content as they went to sleep. Families reflected on how important it was for them to be happy with the service and to be able to trust staff to provide good care. Comments received included that one relative trusted staff "100%". Another family told us "(x) runs in happily when he returns to Hyde and tells us he likes Hyde with a thumbs up, what more can you ask for?". The young people were also able to visit their families at home. One young person went home every other weekend . Their relative told us that the service was very flexible around this and would accommodate changes if the family requested it.

Two family days were held at Hyde Lodge throughout the year. The registered manager told us these were to celebrate the achievements of all the young people. For one person in particular a recent family day had enabled the person to see extended family members that they hadn't seen for a number of years. These days were also an opportunity for families to meet and support each other as well as for the young people to showcase some of their creations from the art and drama therapy sessions they attended.

Is the service responsive?

Our findings

The service offered outstanding personalised care that was responsive to the young people's individual needs. One relative commented "The staff are very well in tune with him and will take extra steps to help him to cope with his anxiety by avoiding situations that could upset him and to calm him down when needed" and "He has a busy and happy life doing lots of activities that he enjoys and gets along well with the other young people and staff"

With the support of staff, the young people were fully supported to be part of their local community and make positive contributions in accordance with their individual needs and abilities. Staff had supported a number of enterprise schemes that all the young people had been part of and had allowed them to raise money and purchase items for their home. In the past, the young people had been involved in a 'pizza' enterprise, whereby they made and sold pizza to staff at the adjoining school. The registered manager told us how each young person had been involved, for example through chopping up items or putting the toppings on the base. Other schemes had included a car valet service and growing herbs in the gardens to be sold to the school kitchen. We saw from meeting minutes how the young people had then been able to decide on how they spent their money, being given a choice of sensory equipment or a karaoke machine. Visual prompts had been used at the meeting to support people in making their choice. As well as the sense of achievement in being part of a successful venture, this also empowered the young people to make choices and have their voices heard. The young people initially chose to purchase the sensory equipment but subsequently raised enough funds to also buy the karaoke machine. These schemes promoted the young people's self esteem and sense of achievement.

Some of the young people at the home took part in work experience around the house and school and got paid for their time. Once they'd received their payment staff took them out to spend their money. The registered manager told us this was to support them in making a link between working hard and being paid for their time and efforts. One person for example was paid for laying tables at meal times and another person was paid to serve bread. This provided the young people with a sense of achievement and enabled them to contribute positively to the running of the house.

People had opportunity to take part in a wide range of activities and experiences. One relative commented "He's out and about all the time with a very active stimulating programme". One young person was going out horse riding on the afternoon of our visit. People's activity programme was highly personalised and took account of their cultural needs. One young person was relatively new to the service and in taking account of the person's cultural needs, staff had arranged for a Bollywood dancer to come to the service once a week. Several staff commented on how much the young person enjoyed this experience. To meet another person's cultural needs, staff supported a young person to go to Caribbean restaurants and also a Samba group. The registered manager recognised and utilised the skills of the staff team to provide enriching activities for the young people. Amongst the staff team there was a drama therapist and an art therapist who both ran groups for the young people. The young people had used their artistic skills to decorate and sell tote bags. As part of their drama group, the young people were able create a poem which they then shared with families at one of the service's family days. Other activities that the service were engaged in included a

gospel choir and a disco. There was a positive attitude amongst the staff team to encouraging the young people to take part in a wide range of activities that perhaps might appear initially to be difficult for them. One young person for example, found lots of noise and stimulation difficult and so the disco setting that other young people attended could potentially make them anxious. However staff decided to give this person the chance to go anyway and had a plan in place to support them if they weren't enjoying the disco. As it transpired, the young person thoroughly enjoyed the experience and now attends regularly with their peers. This reflected the 'can do' approach to supporting the young people at Hyde.

The registered manager told us that once a week young people from Hyde Lodge attended a specialist centre to support them in developing their life skills. The centre was set up with various scenarios such as road crossings and train platforms to support the young people in developing the skills to be safe when outside of the house. The registered manager told us that the service had also recently trained a number of staff to take the young people to a climbing wall. This demonstrated a commitment amongst the staff team to provide a wide range of physical and social activities.

A further example of the young people being supported to be active members of the community was a charity event that they were supported to take part in to raise money for a charity that had previously supported the young people at Hyde Lodge. The race took place in London and the registered manager talked to us about how staff had come in very early in the morning to support the young people to get to London in time for the race. The young people had raised a significant amount of money for the charity they were supporting. This was a significant achievement for the young people and staff supporting them.

People's rooms were personalised and took account of each individual's personality and particular needs. One relative pointed out that in their loved one's room, staff had placed a mirror on the wall by the sofa because they had noticed how the person like to look in the mirror and this meant they could do so whilst seated comfortably. We saw how this person often turned their head to look at the mirror. The registered manager pointed out in another person's room how they had a specially made medicine cabinet that was safe for this person. This meant that alongside their peers, this person could have their own medicine stored in their room. These details that could be seen as relatively small, reflected how well the staff understood and respected the young people they supported.

The young people at Hyde Lodge were not able to express their concerns or make complaints verbally. However staff worked intensively and closely with them and it was clear that they understood their individual behaviours very well and would understand when a person might be expressing that they were upset or concerned. One member of staff commented for example that the young person they supported would bite their hand at times when they were anxious or upset. A family member commented that in a previous placement their loved one had expressed distress when they left them after visiting; however this was no longer the case when visiting the person at Hyde lodge. The registered manager told us they had received no formal complaints in the last 12 months.

The young people had clear and personalised support plans in place. These were created with pictures and symbols to support them and help make them easier to access for the young person concerned. Plans were reviewed regularly in conjunction with the young person and family members to ensure they were current and met the person's needs. Support files contained a 'pen portrait' of the young person. This included details of any diagnoses the young person had. The young people's daily routines were described so that staff would know how best to support them. This was particularly important for the young people as following their preferred routines would help manage their anxieties.

There was clear guidance in place describing the best ways to manage the young people's behaviour. This

included for example providing clear boundaries for the young person and giving specific praise when things had been done well.

Is the service well-led?

Our findings

The service was well led. There was a registered manager in place, supported by shift leaders. All staff commented positively about the leadership of the service and felt well valued and supported in their roles. Staff felt able to raise any concerns or issues they had. One member of staff told us about a suggestion they had made in relation to suggesting more use of the outdoor space in the summer months. They told us this had been listened to and put in to action. One member of staff commented that it is a "lovely place to work."

There was a desire to continually improve the service. One example of this was reviewing the induction programme to look at how new staff the service could be further supported. One of the shift leaders told us they had been given responsibility to carry out this piece of work. The registered manager also told us how they were working with a member of the local authority leaving care team, to improve the way in which they collected the views of the people they supported. They were looking at doing this by improving the forms they used to gather information. The service also worked closely with the Community Learning Disability Team (CLDT). Speech and Language therapists had trialled their communication training at the service.

The registered manager told us they were a member of a care forum and although they could not always attend the meeting, they would receive the minutes of meetings by email and keep informed about any issues and developments within the care sector.

There were systems in place to monitor the quality and safety of the service. This included commissioning a consultant to review the service. There were also regular audits, including a weekly medicines audit and audits on the environment and infection control. The registered manager completed a monthly report on ant medicines errors, accidents and any compliments or complaints. We also saw records of night checks being carried out to ensure staff overnight were performing their duties as expected. This helped the registered manager identify and act on any concerns about the service.

When any issues were identified, this was taken as opportunity to reflect on practice and make improvements if necessary. We saw for example, that following a medicines error, this was discussed with the member of staff concerned and the medicines policy was reviewed. Further improvements were made in relation to medicines administration. This demonstrated a positive and transparent approach to managing the service.

There were established communication systems in place. Staff and the registered manager discussed the service any developments through staff meetings, handovers and group supervisions. We also saw that a newsletter was produced to keep families informed