

Turning Point Dove Lane

Inspection report

7 Dove Lane
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Ratings

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

Summary of findings

Overall summary

About the service: Dove Lane is registered to provide accommodation and personal care for up to six people with learning disabilities. At the time of inspection, four people were using the service.

People's experience of using this service: People continued to receive safe care. Staff understood safeguarding procedures that should be followed to report abuse and incidents of concern. Risk assessments were in place to manage risks within people's lives, whilst also promoting their independence.

Staff recruitment procedures ensured that appropriate pre-employment checks were carried out. Staffing support matched the level of assessed needs within the service during our inspection.

Staff training was provided to ensure they had the skills, knowledge and support they needed to perform their roles. Specialist training was provided to make sure that people's needs were met and they were supported effectively.

Staff were well supported by the manager, and had one to one supervisions. The staff we spoke with were all positive about the senior staff and management in place.

People's consent was gained before any care was provided. 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

Staff continued to treat people with kindness, dignity and respect and spent time getting to know them. Care plans reflected people's likes and dislikes, and staff spoke with people in a friendly manner.

People were involved in their own care planning and were able to contribute to the way in which they were supported. People and their family were involved in reviewing their care and making any necessary changes.

A process was in place which ensured people could raise any complaints or concerns. Concerns were acted upon promptly and lessons were learned through positive communication.

The service continued to be well managed. The provider had systems in place to monitor the quality of the service. Actions were taken and improvements were made when required.

Rating at last inspection: Good (report published 24/02/2016)

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remained rated Good overall.

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?

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 caring
Details are in our caring findings below.

Good ●

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 ●

Dove Lane

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 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.

Inspection team:

The inspection team consisted of one inspector.

Service and service type:

Dove lane is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager 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:

The inspection was unannounced.

What we did:

We reviewed the information we held about the service. This included information received from the provider about deaths, accidents/incidents and safeguarding alerts which they are required to send us by law. We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once a year to give some key information about the service, what the service does well and improvements they plan to make.

People using the service were not able to verbally communicate with us. We met four of the people using the service and observed staff interact with them. We spoke with one relative of a person who used the service on the phone. We also spoke with the registered manager and three staff members.

We looked at three people's care records. We also looked at other records relating to the management of the service including staffing, quality assurance, and accidents/incidents.

Is the service safe?

Our findings

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

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

Systems and processes

- People were supported safely. A relative of a person using the service told us, "I have no worries about [name], it's a safe place."
- Staff were trained in safeguarding and knew what to do and who to tell if they had concerns about the well-being of any of the people using the service.
- If safeguarding incidents occurred staff reported these to other agencies, as required, including the local authority and CQC.

Assessing risk, safety monitoring and management

- Risk assessments in place had information about how to support people safely. This included assessments on social isolation, travel, risk of falls, and positive behaviour support plans.
- Staff we spoke with all felt comfortable supporting people safely, and felt that risks were assessed appropriately and in a way which promoted as much independence as possible for each person.

Staffing levels

- There were enough staff on shift to keep people safe. The registered manager told us the service used occasional agency staff, but most shifts were covered by permanent staff. Staff told us that staffing levels were good.
- The provider had safe recruitment procedures that ensured that only staff suited to work at the service were employed.

Using medicines safely

- People continued to receive their medicines as prescribed. Medicines were stored securely, and medication administration records in use were accurate, and regularly checked for any mistakes.
- Some topical medicines were being applied, but did not contain instructions or records as to where on the person's body they should be applied. The registered manager showed us new records that would be used from now on to make sure this information was recorded appropriately.
- Where people were prescribed medicines to take 'as and when required' there was sufficient detail to guide staff on when to administer them safely and consistently.

Preventing and controlling infection

- The service was clean and tidy. Staff followed infection prevention and control procedures to protect people from infection. Staff were trained in infection control and followed the provider's policies and procedures.
- The kitchen where all food was prepared, had been rated as five stars for food hygiene practices, by the

local authority.

Learning lessons when things go wrong

- Incidents and accidents were reviewed to identify any learning which may help to prevent a reoccurrence.
- Staff meetings were used to feedback on areas of the service that had been identified by management as requiring improvement.

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

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

- Management assessed people's needs prior to moving into the service to ensure the service was appropriate for them. Information obtained included the person's diagnosis, their medicines, how they communicated and their care needs. This ensured that people could receive the right care for them.
- People's needs and wishes were assessed and care and support was planned effectively. Staff gained knowledge about people's needs from family members, to ensure they understood people's needs.
- Staff had access to up to date policies and procedures based on current legislation and best practice standards.

Staff skills, knowledge and experience

- People were supported by staff who received ongoing training. New staff had an induction programme, which ensured they received training in areas relevant to their roles. This included the Care Certificate. The Care certificate covers the basic skills required to work in care.
- We observed that staff were confident in supporting people with complex needs, which included behaviours that may challenge.

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

- People were supported to maintain a healthy and balanced diet.
- We observed lunch being served, and saw that people were provided with choice and the support they required. Staff understood when people did not want to eat, and provided support at alternative times which suited them.
- People's dietary requirements and preferences were recorded in their care plans and understood by staff.

Staff providing consistent, effective, timely care within and across organisations

- Care and support plans were personalised and had been reviewed and updated regularly to ensure staff provided consistent and up to date care.
- Our observations were that staff responded quickly to people, and gave them the time they required.

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

- The service was designed in a way which made it accessible for the people using it. Ceiling hoists were in place where required to ensure people could be moved safely and comfortably.
- People's rooms were personalised to their needs, and communal areas, including an area with sensory equipment in it, was available to use.

Supporting people to live healthier lives, access healthcare services and support

- People's healthcare needs were met. Staff were knowledgeable and experienced in supporting people with complex health needs.
- For example, one person used a continuous positive airway pressure (CPAP) machine. Staff were supporting the person to use and maintain this machine accurately.
- Staff understood the signs and symptoms of people's illness, and promptly obtained the support of medical professionals when required.

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).
- We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met, and found that they were.

Is the service caring?

Our findings

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

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

Ensuring people are well treated and supported

- People were well cared for. One relative of a person using the service said, "[Name] seems very content and happy. They have a better social life than I do."
- One staff member told us "We try and create a family feel to the home."
- Our observations during inspection, were of a staff team and registered manager who clearly knew, understood, and respected people, and spoke with them in a caring and warm manner.

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

- People were able to express their views make their own decisions when possible. There was a keyworker system set up, which meant that staff members took a lead role in ensuring a particular person's care was up to date and met their needs. This included keeping track of things that were important to the person, such as key family dates and birthdays, and reviews of activities and goals to be set.
- Staff understood and encouraged the decisions that people were able to get involved in. People using the service were non-verbal, but we observed staff use pictures and objects of reference to allow people to make choices.
- Staff knew people well enough to understand the body language and vocalisations that were made, to ensure people were involved in decision making as much as was possible.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and knocked on doors before entering.
- People were supported to maintain relationships with friends and family, this included spending time out socialising with them, and family members visiting the service.
- People's confidentiality and privacy was protected. Records were stored securely.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

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

Personalised care

- People's care plans were detailed and had information about people's specific needs, their personal preferences, routines and how staff should best support them. Each person's plan was regularly reviewed and updated to reflect their changing needs.
- The care being delivered was personalised and considered people's likes and dislikes and culture. For example, a local vicar had visited a person to support them with their religious interests.
- People were encouraged to have new experiences. For example, a 'Food of the world' theme was set up weekly to enable and encourage people to try out new food and flavours they may not have tried out before.
- Activities were planned for each person individually. This included assisted horse riding, aromatherapy, and music sessions.
- Staff understood the importance of people's relationships with family members and encouraged positive relationships. For one person, this included staff members travelling to the person's parents own care home, picking them up, and bringing them to the service to visit them. Staff explained to us that even though this relative was now in need of receiving care themselves, they ensured this relationship was kept in place, and provided this relative with the care they needed to visit the person at the service.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure which they followed. The relative we spoke with said they had not had to make any complaints but knew how to do so. No recent complaints had been made at the time of inspection. An easy read complaints procedure was in place to support people's understanding.

End of life care and support

- No current end of life care was being delivered. The registered manager was aware of what was required to support people with end of life care and care plans documented people's needs and requirements in this area if needed.

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

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

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

- The service continued to be well-led and there was an open, person-centred culture. The relative of a person we spoke with, confirmed they felt the service was well run, and they could speak with management as they required.
- The provider was aware of and had systems in place to ensure compliance with the requirements of the duty of candour. (The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment).

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

- Staff were clear about their roles and responsibilities and there was a clearly defined management structure. Staff told us they received good support and feedback, and the management team were consistent in their approach. One staff member said, "I love working here." Another staff member said, "The registered manager is new, and has made some positive changes, they are very hands on and know the residents well."
- There was a registered manager in post. 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.

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

- The people and their families were engaged with the running of the service. One relative told us, "The staff keep me well informed about everything going on."
- Questionnaires were used as a way of gaining feedback from relatives of people using the service. We saw that when concerns had been raised, responses had been provided promptly.

Continuous learning and improving care

- The registered manager had robust and detailed quality monitoring systems in place to continually review and improve the quality of the service provided. This included conducting spot checks at different times, to ensure the quality of care remained high.
- Action plans were formulated and acted upon when necessary as a result of audits or from meetings with people and feedback gathered.

Working in partnership with others

- The service worked in partnership with outside agencies and had positive links within the community. One staff member said, "[Name] is a regular at the local beauticians. They know us there, and in other places in this community."
- The staff team and management were open and honest, and worked with other health and social care professionals whenever required.