

Life Path Trust Limited

Life Path Trust Limited - 2 Ellys Road

Inspection report

2 Ellys Road Radford Coventry West Midlands CV1 4EW

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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

2 Ellys Road is a respite service registered to provide accommodation to a maximum of ten people with learning disabilities for a short period of time. There were six people staying at the service at the time of our inspection.

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 people who use the service can live as 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.

People's experience of using this service and what we found

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People felt safe at 2 Ellys Road and staff understood how to protect people from harm. Medicines and risks associated with people's care and support were well managed. Staff were recruited safely and received the training and support needed to carry out their roles safely and effectively.

Staffing levels were flexible to ensure staff were available at the times people needed. People's nutrition and hydration needs were met, and the staff team worked in partnership with health and social care professionals to ensure people received effective care.

People were supported by an established staff team who were friendly and caring. People's rights were upheld and their independence prompted to assist people to achieve their goals and aspirations. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People's care and support was based on their individual needs and choices. Care plans were personalised, through some were limited in detail. Action was taken to address this. People and relatives had no concerns but understood who to speak to if they wanted to make a complaint. People were actively supported to maintain links with the local community and follow their interests and hobbies.

People and relatives were very satisfied with the service provided and the way the home was managed. Effective systems were in place to monitor the quality and safety of the service and to support continual improvement. The registered manager and staff team were committed to delivery good quality person

centred care.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (published 30 August 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information 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?	Good •
The service was safe.	
Details are in our safe findings below	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-Led findings below.	



Life Path Trust Limited - 2 Ellys Road

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was conducted by one inspector.

Service and service type

2 Ellys Road 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.

The service had a manager who had 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 visit took place on 16 December 2019 and was announced. We gave the service 48 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We reviewed information we held about the service, including notifications the provider is required by law to send us about events that happen within the service and information the provider sent us in the provider

information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with three people during our visit to gather their views of the service they received. We spoke the registered manager and three care staff.

We reviewed a range of records about people's care and how the service was managed. This included two people's care and three people's medicine records to ensure they were reflective of people's needs. We looked at two staff personnel files to ensure staff had been recruited safely and records relating to the management of the service such as quality audits and staff training data.

Following our visit, we spoke with two relatives on the telephone to gather their views about the service provided to their family members.



Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks associated with people's care, were assessed and risk management plans directed staff on how to manage and reduce risks. For example, one plan informed staff how to support a person who did not always recognise risk associated with crossing the road. Staff understood this guidance.
- Emergency plans were in place if the building had to be evacuated. People told us they knew what to do if the fire alarms sounded. One person said, "We go right outside to the car park."
- Staff received fire safety training and knew how to keep people safe in the event of a fire.
- The provider's systems and processes ensured the environment and equipment used was safe.

Staffing and recruitment

- Safe recruitment practices were followed.
- People said staff were 'always' available to provide support when needed. Staff had the time to chat with people and to support people to engage in their chosen activities inside and outside the home.
- The registered manager regularly reviewed people's needs and amended staffing levels accordingly. Staffing rotas confirmed this.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. One person told us, "I couldn't feel safer." Relatives shared this viewpoint. One said, "No question [name] is safe, there."
- Systems were in place to protect people from harm. Information was available in formats people could understand if they wished to report any concerns.
- Staff completed safeguarding training and demonstrated they understood how and when to report concerns to the registered manager. Whilst confident these would be addressed, one staff member told us, "I would go to CQC if I thought nothing had been done."
- The registered manager understood and had met their regulatory responsibilities to refer safeguarding concerns to the local authority and CQC as required.

Using medicines safely

- People received their medicines as prescribed.
- Medicines were managed, stored, administered and dispose of safely in line with best practice guidance. This included medicines prescribed 'as required'.
- Medicines were administered by trained staff whose competency was regularly checked.

Preventing and controlling infection

• There were systems in place to prevent and control the risk of infection.

- Staff had completed infection control training and practiced good infection control.
- The environment was clean. Staff followed cleaning schedules to ensure good standards of cleanliness were maintained throughout the home.

Learning lessons when things go wrong

- Accidents and incidents were reported and recorded.
- The registered manager monitored and analysed accidents and incidents to identify and address any patterns or trends to minimise the risks of a reoccurrence. For example, a referral to an occupational therapist had resulted in new equipment being provided to ensure staff could safely support a person who had mobility difficulties.
- There was an open culture in the home. Learning when things went wrong was encouraged and any action needed was shared with staff through handover, individual and group meetings.



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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and feedback confirmed this.

Staff support: induction, training, skills and experience

- People and relatives had confidence in staff's knowledge and skills. One person told us, "They [staff] show me how to do things. It's really helped me."
- Staff completed an initial induction and the on-gong training they needed to be effective in their roles. One staff member new to working in a social care setting had completed the Care Certificate (nationally recognised induction standard). They told us, "It was very informative, interesting, and made me look at things differently." Staff training was up to date.
- Staff received support and guidance through observations of their practice, individual and team meetings which they valued. One staff member said, "The manager encourages us in a very supportive way. We are always looking to improve our practice."

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 when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager worked within the requirements of the MCA. A DoLS application had been submitted for one person whose respite stay had been extended. However, the person's records did not clearly reflect this. This was addressed during our visit.
- Staff completed MCA training. We saw they worked within the principles of the Act by gaining people's consent before they provided them with assistance.

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

- People had access to health and social care professionals when required.
- The whole team worked in partnership with other professionals to ensure people received effective care.

The registered manager told us, "It is important to be consistent in our approach when supporting a citizen (person) to ensure we have a shared understanding of what is working and what may need to change."

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

- People were supported to eat a varied and nutritionally balanced diet and were involved in planning weekly menus which reflected their individual choices.
- Staff knew people's dietary preferences and understood the need to seek specialist advice if any risks associated with eating and drinking were identified.

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

- The environment was homely. One person commented, "It's home from home."
- People were encouraged to personalise their bedrooms during their respite stay with items they brought from home.
- The provider did not own the premises and repairs to, and maintenance of, the structure of the property was the responsibility of the landlord. The registered manager had informed the landlord of areas requiring further maintenance and updating was needed and were waiting for confirmation the work would be completed.



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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect and involved as partners in their care.

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

- People were active partners in their care. One person said, "It's about my goals and what I want to do. Staff help me to achieve them."
- People's views were gathered through regular reviews of their support needs, aspirations and goals. A relative told us before each respite stay the service asked their family member to complete a 'goal planner' to inform staff what they wanted to do and achieve during their stay.
- Relatives felt involved in their family members care. One said, "After each stay we get an update. Communication is excellent."

Ensuring people are well treated and supported; equality and diversity

- People and relatives described staff as friendly and caring. One person told us, "The staff are not just staff. We have a strong bond. They are my friends and I trust them."
- Staff practices demonstrated people mattered. Staff spoke fondly and respectfully about the people they supported with whom they had developed positive relationships. One staff member told us, "Our motto is, work as a team, give the best we can because we are one big family."
- Staff had completed equality and diversity training and understood the importance of learning about, and respecting people's differences to ensure person centred care was provided.
- People's care records contained information about their background, beliefs and preferences. Staff used this information to provide personalised care.
- Staff supported people to stay in touch with their family and friends and maintain important relationships.

Respecting and promoting people's privacy, dignity and independence

- People's independence was promoted. One person told us," Staff have helped me improve my independence and life skills and now I am going to live in my own home. It's the best thing ever." This demonstrated staff embraced the provider's mission statement, 'to provide people with the best support and service to enable them to feel valued and achieve their dreams'.
- Staff understood the importance of upholding people's privacy and dignity. One said, "It's simply about respect which the citizens [people] have to right to expect."
- People's personal information was managed in line with data protection law.



Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received personalised care and support from a consistent staff team who knew them well. One relative told us consistency was important for their family member because they did not like change. They added, "[Name] knows all the staff and that's what makes it work."
- People were fully involved in planning their care and support which focused on their individual needs, choices, preferences and goals.
- Care plans were person centred and gave a clear picture of the person as an individual. However, we found information in some care plans was limited, for example one person's behaviour management plan lacked detail about possible triggers. Despite this recording omission, staff demonstrated a comprehensive understanding of the person's behaviours and how these should be managed. The registered manager amended the care plan during our visit.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

• People were very positive about the opportunities and support they received to engage in meaningful activities. One person told us, "It's great. There are so many things I enjoy that I can do. Today I'm going to Birmingham with [staff member] to have a look around." Another person had shared their dream was to attend a musical in London. Their dream had been fulfilled.

Meeting people's communication needs Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service was meeting the requirements of AIS.
- People were provided with information in formats they could understand.
- Staff used people's preferred methods of communication to ensure engagement with people was effectively. This included, using gestures and pictures.
- Communication care plans informed staff how they could best communicate with people. For example, one plan detailed the sounds a person used to express they were feeling angry or distressed. Staff knew this and understood how to support the person to minimise these feelings.

End of life care and support

• The registered manager told us because the service provided a respite stay service end of life care was not

provided. However, details of relatives to be contacted in the event of a sudden death were securely stored to ensure people's end of life wishes were respected.

Improving care quality in response to complaints or concerns

- The provider's complaint procedure was available in different formats, including easy read.
- People and relatives told us they had no cause to complain but would feel comfortable to do so if needed. One relative said, "I wouldn't hesitate. I know the manager would respond very quickly to any issues."
- Staff demonstrated they understood the importance of supporting people to raise concerns of complaints. No formal complaints had been received since our last inspection.



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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and staff team were passionate about providing high quality individualised care. People were at the heart of the service.
- The culture at 2 Ellys Road was open, welcoming and inclusive of people's unique needs and diversity. People and staff told us they worked as a team to enable people to achieve their goals. This way of working supported the providers vision which was statement, 'to enable people with learning disabilities to live their life to the full'.
- People and relatives spoke highly of the service provided and the way the service was managed. One person told us, "The support I get here is the best." A relative told us, "I've known [registered manager] for a number of years and can describe her in one word 'great'."
- Staff enjoyed working at the service. They told us this was because of the supportive approach of the registered manager and the difference they felt privileged to be able to make to people's lives. One staff member told us they were going to 'deeply miss' a person who was moving onto live independently. They added, "But I am so happy for [Name]."

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

- People had opportunities to maintain and develop links with their local community. One person told us they visited a local chess club which they enjoyed.
- The provider invited people and their relatives to complete a feedback sheet about the quality of the service after each respite stay to identify any areas for improvement. There was a focus on treating people with equality and on involving and empowering those with communication difficulties, to ensure their voices were heard and valued.
- Feedback provided indicated the home was well run, people were happy, and their individual needs were met. A relative commented, "I can't think of anything that could be improved, it's consistently good."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

• The registered manager had good oversight of what was happening at the home and was seen engaging in a friendly and familiar manner with people and staff throughout our visit.

- Staff received the support and guidance they needed to understand and be effective in their roles. One staff member said, "We work in a supportive environment and are comfortable to speak up in team meetings. The registered manager listens which makes you feel valued."
- The registered manager updated their knowledge through attendance at meeting with other registered managers and training. Best practice examples and any learning gained was shared with staff to further support their development.
- The registered manager and provider understood their regulatory responsibilities, including the need to be open and honest when things went wrong and the legal requirement to display their latest CQC rating within the home and on their website.
- Records confirmed the providers quality monitoring systems continued to be effectively used to monitor, maintain and improve the quality and safety of service provided.

Working in partnership with others: Continuous learning and improving care

- The home had developed good links with the local community and were supportive of community projects and services. For example, a coffee evening had been hosted for relatives and friends during which a raffle was held to raise funds for a national charity.
- The service worked in partnership with health and social care professionals who were involved in people's care.
- Throughout our inspection the registered manager and staff team were open and honest. They welcomed our inspection and feedback.