

National Autistic Society (The)

Overcliffe House

Inspection summary

CQC carried out an inspection of this care service on 17 November 2017. This is a summary of what we found.

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 ●

This inspection was carried out on 17 November 2017 and was unannounced.

The home provides care and support for up to twelve people with learning disabilities and/or autism. People who used the home had moderate to low care needs, with some now needing consideration as elderly people having lived at the home for over thirty years. At the time of our inspection there were twelve people living at the home. The home consisted of two houses next door to each other with accommodation split over two floors. There was one bedroom on the ground along with communal living space and the rest of the bedrooms were on the first floor.

A registered manager was employed at the home. A registered manager is a person who has registered with the Care Quality Commission to manage the home. 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 home is run.

At the previous inspection on 30 September 2016, we made one recommendation concerning finances and found two breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At the last inspection, we found people were at risk of scalding as the water temperature had been too hot. Records showed that the temperature had been taken regularly, however when they had

gone above what is considered safe for people who are vulnerable, no action had been taken to protect people.

At this inspection, we found the registered manager had robust audits of water temperatures around the home and immediate action had been taken when necessary to keep people safe.

At the last inspection we found that there were not robust quality control measures in place. The manager had not reviewed audits being undertaken by staff and therefore opportunities had been missed to improve the service provided to people and keep them safe.

At this inspection we saw that the manager was monitoring monthly checks being completed by staff. That the quality of records such as daily records and medication records were reviewed and action taken when appropriate.

At the last inspection, it was recommended that people's finances be audited by an external auditor, the manager confirmed this had been arranged on a yearly basis.

People were assessed as individuals so that staff understood how people's care was planned to maintain their safety, health and wellbeing. Risks were assessed within the home, both to individual people and for the wider risk from the environment. Staff understood the steps to be taken to minimise risk when they were identified.

The registered manager had plans in place for emergency evacuation should this become necessary. These were individual plans for each person and were kept in people's care files and in a grab bag should the need arise. It ensured that all staff in the home would understand how to continue people's care, should the home be evacuated in an emergency.

Incidents and accidents were recorded and checked by the registered manager to prevent these happening again.

People were kept safe by staff who understood their responsibilities to protect people living with learning disabilities and autism. Each person had a key worker who assisted them to learn about safety in and outside of the home. Staff had received training about protecting people from abuse. The staff and management team had access to and understood the safeguarding policies of the local authority and followed the safeguarding processes.

There were policies and procedures in place for the safe administration of medicines. Staff followed these policies and had been trained to administer medicines safely.

People had access to GPs and their health and wellbeing was supported by prompt referrals and access to medical care if they became unwell. Records were kept to assist people to monitor and maintain their health. Staff had been trained to assist people to manage daily health challenges they faced from conditions such as epilepsy. Staff were also mindful of those people who were now aging and the conditions they may now face.

The home was welcoming and friendly, with some people coming forward to find out who was at the door and introduced themselves. Staff provided friendly compassionate care and support. People were encouraged to get involved in how their care was planned and delivered. Staff were deployed to enable people to participate in community life, both within the home and in the wider community.

Staff upheld people's right to choose who was involved in their care and people's right to do things

for themselves was respected. People were consulted about their care and staff were flexible to requests made by people to change routines and activities.

The Care Quality Commission (CQC) monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care services. Restrictions imposed on people were only considered after their ability to make individual decisions had been assessed as required under the Mental Capacity Act (2005) Code of Practice. The registered manager understood when an application should be made.

Many people had been at the home over thirty years, others having lived in other homes within the organisation before coming here. Staff knew people extremely well and people were very involved in their own routine and activities.

Recruitment was robust. The registered manager recruited staff with relevant experience and the right attitude to work well with people who had learning disabilities and autism. New staff were given extensive induction and on-going training which included information specific to learning disability and autism services.

Staff received supervisions and training to assist them to deliver a good quality service and to further develop their skills.

Staff understood the challenges people faced and supported people to maintain their health by ensuring people had enough to eat and drink and had access to health care professionals when required.

The registered manager produced information about how to complain in formats to help those with poor sight or communication skills to understand how to complain. This included people being asked frequently if they were unhappy about anything in the home.

You can ask your care service for the full report, or find it on our website at www.cqc.org.uk or by telephoning 03000 616161