

Mr & Mrs M Govindan

The White House Care Home

Inspection report

The White House
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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

The White House Care Home is a residential care home which specialises in supporting people with learning disabilities. 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 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.

The White House Care Home is a large home, bigger than most domestic style properties. It is registered for the support of up to 9 people. Nine people were using the service. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting in with the residential area and other domestic homes of a similar size. There were no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home.

People's experience of using this service

People said they were safe at the service. Staff were trained to safeguard people from abuse and knew how to minimise identified risks to people's safety. Health and safety checks were carried out of the premises and equipment to make sure they were safe. The premises were clean and tidy. Staff followed current practice to reduce infection and hygiene risks at the service.

There were enough staff to support people. Managers carried out checks on new staff to make sure they were suitable to support people. Staff were given relevant training to help them meet people's needs. Staff were supported by managers to review and improve their working practices so that people experienced high quality care and support.

People had personalised their rooms and communal areas which created a homely and comfortable environment for people to live in. People took part in a range of activities and events and were encouraged to pursue their interests and hobbies. Staff supported people to build and maintain social relationships with others and the people that mattered to them.

People and their relatives were involved in planning and making decisions about the care and support they needed. People had current care plans which set out how their care and support needs should be provided. Staff knew people well and understood how their needs should be met.

Staff used people's preferred method of communication when interacting and engaging with them. Staff were kind, friendly and caring. They supported people in a dignified way which maintained their privacy and independence. 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.

People were encouraged to keep healthy and stay well. Staff supported people to eat and drink enough to meet their needs and to take their prescribed medicines. We identified a medicines recording error. Managers said they would undertake weekly checks of medicines after this inspection to make sure records were maintained properly. People were able to access healthcare services when needed. Staff worked well with other healthcare professionals and acted on their recommendations. When people became unwell, staff sought help for them promptly.

People and their relatives had no concerns about the care and support provided by staff. They knew how to make a complaint if they needed to. Managers made sure any accidents, incidents and complaints were fully investigated and people were informed of the outcome. Learning from investigations was acted on and shared with staff to help them improve the quality and safety of the support they provided.

Managers undertook quality and safety checks of the service. Some of the formats used did not help managers identify areas where the service could improve further. Managers said they would review current arrangements to make sure they supported the service to continuously improve.

People, relatives and staff were encouraged to have their say about how the service could improve. Managers acted to make improvements and since our last inspection had introduced a new electronic records system. This had improved managers' oversight of the service. Managers were looking for further ways to improve the service for people. They had plans to refurbish the premises with a view to making this more accessible and responsive to people's changing needs.

Managers understood their responsibility for meeting regulatory requirements. They worked proactively with other agencies and acted on their recommendations to design the care and support provided to people.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

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.

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 inspection was planned based on the previous rating of 'Good'.

Follow up

We will continue to monitor the service to ensure that people receive safe, compassionate, high quality care. Further inspections will be planned in line with our inspection schedule or in response to concerns.

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 ●

The White House Care Home

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 inspector and one inspection manager.

Service and service type

This service is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 registered with the Care Quality Commission. 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 before the inspection

Before the inspection we reviewed the information we held about this service including notifications the provider is required by law to send us about events and incidents involving people. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the

judgements in this report.

During the inspection

We spoke to two people using the service and one visiting relative about their experiences of the care and support provided by staff. As most people using the service were unable to speak with us due to their communication needs, we also observed interactions between people and staff.

We looked at three people's care records and staff records relating to training, supervision and recruitment. We reviewed medicines management arrangements and other records relating to the management of the service, including audits, policies and procedures. We also spoke to the registered manager, the deputy manager and a senior care support worker.

After the inspection

We spoke to one relative and asked them for their feedback about the service. We continued to seek clarification from the provider to validate evidence found. We looked at servicing and maintenance information related to the lift and the service's complaints policy.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People said they were safe. One person told us when we asked them if they felt safe at the service, "Certainly, yes. Most secure."
- Relatives also said people were safe at the service. A relative told us, "Yes. I think [family member] is safe. Definitely." Another relative said, "[Family member] is very happy there. I have no worries at all."
- Staff had been trained to safeguard people from abuse and knew how to recognise signs that a person may be at risk and who to report their concerns to about this.
- At the time of this inspection there were no current safeguarding concerns about people using the service. Managers were aware of their responsibility to liaise with the local authority if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- Risks to people's safety and wellbeing had been assessed and plans were in place to manage these in an appropriate way. For people whose behaviour might challenge them and/or others, there was guidance for staff about how to reduce the risk of this behaviour presenting or causing harm to the person or others.
- Staff were knowledgeable about risks to people and knew what action to take to make sure these were minimised to keep people safe.
- Staff were trained to deal with emergency situations and events if these should arise.
- We observed staff were alert to people's whereabouts and supported people to move safely when needed.
- Managers undertook health and safety checks of the premises and any issues found through these were dealt with. There were arrangements in place for the premises and equipment to be maintained and serviced to make sure they remained in good order and safe for use.

Staffing and recruitment

- There were enough staff to support people. Staffing levels were planned based on the level of support people needed each day to keep them safe at home and in the community.
- Managers said agency staff were not used at the service. They told us this was because they wanted to ensure people received consistent support. At the time of this inspection managers were actively trying to recruit new staff to work at the service to increase available staff resources.
- Managers carried out appropriate checks on staff that applied to work at the service. These checks helped them make sure only suitable staff were employed to support people.

Using medicines safely

- People were supported to take their prescribed medicines. Our checks of stocks and balances of medicines and records showed people consistently received the medicines prescribed to them.
- We noted for one person staff had not signed the person's individual medicines administration record (MAR) on the day of our inspection. These were for medicines the person was prescribed to take in the morning. Stocks of the person's medicines clearly showed the person had been supported to take these but the staff member had omitted to sign the person's MAR to confirm this. We checked the person's MAR and saw no omissions on other dates which indicated this may have been a one off error made by the staff member.
- We discussed this with the deputy manager who told us they audited medicines monthly and through their checks had not found any recording issues concerning this staff member. They told us they would audit medicines on a weekly basis until they were assured there were no further occurrences.
- Medicines were stored safely and securely.

Preventing and controlling infection

- The premises were clean, tidy and free from odours.
- Staff followed current guidance to reduce infection risks associated with poor cleanliness and hygiene and when preparing, serving and storing food. They had access to cleaning supplies, materials and equipment to help them do this.
- Hand sanitisers, soap and drying facilities were available around the premises for people, visitors and staff to use. This helped to reduce the risk of the spread of infection.

Learning lessons when things go wrong

- Managers investigated accidents and incidents involving people. They took appropriate action when this was needed to reduce the risks of these reoccurring, to keep people safe.
- Learning from investigations was shared with all staff to help them improve the quality and safety of the support provided to people. We saw a good example of this where managers had discussed a recent incident involving a person using the service and how staff could help reduce the risk of this reoccurring.

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 remained the same. This meant 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

- People's care and support needs were assessed by managers prior to them using the service. Managers took account of information provided by people, their representatives and others involved in their care about their healthcare and medical conditions and the support they needed for this.
- People were asked about their preferences when being supported with their needs. Managers had developed individualised care plans for people which set out how, when and from whom they received support. This helped to make sure staff provided support in line with people's preferences.

Staff support: induction, training, skills and experience

- One person said, "Staff are very well trained." They told us staff understood how to meet people's needs.
- Staff received relevant training to help them meet the range of people's needs. This included refresher training to help staff keep up to date with current practice.
- Staff had regular meetings with managers to discuss the support provided to people, any concerns about their role and any further training or learning they needed to help them provide effective support to people.

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

- People had a say in the meals they ate at the service. Managers discussed menus with people on a weekly basis. They used people's feedback to plan meals that people liked which encouraged them to eat well. One person said, "They take a lot of care in the menu and I like roasts. We have roast dinners."
- Staff understood people's dietary needs including any specialist needs they had due to their healthcare conditions. They took this into account when planning and preparing meals.
- Staff monitored people were eating and drinking enough. If they had concerns about this, they asked for support from the relevant healthcare professionals and acted on their recommendations and guidance.

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

- People's records set out in detail how staff needed to support them to manage their health and medical conditions. Staff understood the care and support they needed to provide to help people stay healthy and well.
- People were supported to access services such as the GP, dentist, opticians or other healthcare specialists involved in their care and treatment, when they needed to.
- Staff made sure people attended their healthcare and medical appointments. Recommendations made by healthcare professionals were acted on to help people achieve effective outcomes in relation to their health and wellbeing.

- Staff reported any concerns they had about people's health and wellbeing promptly so that people received appropriate support in these instances from the relevant healthcare professionals.

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

- People said they were comfortable living at the service. One person told us, "My room is fine and airy. I have a very attractive room. I have a window out the back and I can see the valley." Another person said they enjoyed watching their favourite show on the television in the dining room. A relative told us, "It's a very homely environment."
- People were able to personalise their bedrooms and communal areas to make these more homely.
- The large lounge and dining room were decorated with pictures of people and their artwork. This helped create a comforting and familiar environment for people.

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.

- Assessments were undertaken of people's capacity to make and consent to decisions about specific aspects of their care and support.
- There were processes in place where if people lacked capacity to make specific decisions the provider would involve people's representatives and healthcare professionals to ensure decisions would be made in people's best interests.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. Authorisations were regularly reviewed to check that they were still appropriate.

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 remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People said they were well looked after by staff. One person said, "I have a good relationship with the staff. I like [staff member]. She is kind to me. They all are, but I like [staff member]." Another person told us, "The staff are very good."
- Relatives also said people were well treated. A relative told us, "Staff are very nice and friendly to [family member]. You would know if [family member] wasn't happy. When we get back from outings [family member] looks happy to be here." Another relative said, "Well, I think they're incredible. They are very good with [family member]...she is very well cared for there."
- We observed positive interactions between people and staff. People appeared relaxed and comfortable with staff. Staff were warm and friendly and engaged and communicated with people throughout the day. Staff checked how people were and initiated conversations, talking to people about things that were of interest or important to them. Staff were patient and gave people time to make choices about what they wanted to do.
- People's social, cultural and spiritual needs were recorded in their care plans so that staff had access to information about how people should be supported with these. A good example of this was seen for one person who was supported to attend a church weekly, that reflected their cultural and spiritual heritage and background.
- Staff received equality and diversity training as part of their role. This helped staff understand what discriminatory behaviours and practices might look like to help them make sure people were always treated fairly.

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

- People's records contained information for staff about how people wished to communicate and express themselves. This helped staff understand how to support people to have a say about what they wanted in terms of their care and support.
- Staff used people's preferred communication methods when interacting with them.
- English was not the first language for one of the people using the service and staff used translation applications on smart phones and tablets to communicate with the person. This helped the person understand information better and to make decisions about what they would like to do.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful and explained the care and support they wanted to provide people to help people understand what was happening.

- Staff respected people's right to privacy and to spend time alone if they wished.
- People were supported to be independent and do as much for themselves as they could. For example, some people were able to prepare light snacks, drinks or help in the preparation of meals, and staff encouraged them to do this. Staff only took over when people could not manage tasks safely.
- People's records were stored securely so that information about them was kept private and confidential.

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 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's records contained information about them, their life history, their likes and dislikes, hobbies and interests, their preferred routines and their preferences for how care and support should be provided. This helped to make sure people received personalised care and support from staff which met their needs.
- Staff understood people's care and support needs and how these should be met. This meant they anticipated what people wanted. They supported people to do tasks and activities in the way people preferred. A relative told us, "[Family member] has her routine and they keep to this."
- Staff asked people for their consent before they provided any support and gave people time to make choices about what they wanted.
- Managers reviewed the care and support provided to people at regular intervals and promptly informed staff of any changes.

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.

- People's communication needs had been identified, recorded and highlighted so staff had access to relevant information about how they should be supported with these.
- Staff used pictorial information and guides to help people understand the choices available to them for example when choosing a meal to eat or an activity they would like to do.
- Information about how to raise a concern or make a complaint was displayed at the service. This would have benefited from being in a more accessible format, for example an easy to read version, to make this easier for people to understand. We discussed this with managers who told us they would review and update this immediately after our inspection.

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

- Managers told us since our last inspection they had improved the range of activities for people to take part in, due to their changing needs and interests. They told us people wanted to go out and do more social activities and this was reflected in weekly planned activities at the service.
- On the day of our inspection, people chose to go for a pub lunch and this was arranged immediately.
- Other day trips and outings were planned and special occasions and significant events were celebrated at the service. People and their representatives were invited to take part in these.

- People were supported to take part in activities and pursue interests that reflected their preference for how they wished to spend their day. Some people attended a day centre where they took part in a wide range of activities. When people were at home they had access to games, books, DVDs and arts and crafts. During our inspection staff helped people complete puzzles and fill in colouring books which people appeared to enjoy.
- Staff supported people with one to one activities such as going shopping or going out for a walk or coffee. Since our last inspection managers had identified one of the people using the service was passionate about football and had arranged for the person to apply for membership to their favourite club and attend games. As a result of this another person expressed an interest in football and had been recently supported to attend matches.
- People were encouraged to build and maintain relationships with others. One person who had recently started using the service was being supported to build friendships with other people using the service. Managers told us some positive outcomes had already been achieved as the person was starting to acknowledge and greet others when previously they would have ignored them.
- Relatives told us they could visit at any time and were always welcomed by staff.
- Staff maintained regular contact with people's relatives. A relative told us, "I am always informed of anything that is going on with [family member]."

Improving care quality in response to complaints or concerns

- Feedback from people and relatives received during this inspection indicated they had no issues or concerns about the quality of care and support provided by staff.
- One person said, "I couldn't be in a better place, in my situation." A relative told us, "I'm more than happy with the support they provide [family member]." Another relative said, "This is a very good home."
- There were arrangements in place to deal with people's concerns and complaints in an appropriate way. Managers confirmed there had been no complaints made about the service since our last inspection.

End of life care and support

- As part of the assessment of people's needs, people and their representatives were able to state their wishes for the support they wanted to receive at the end of their life. This was documented in their records. This helped to ensure staff would know what to do to make sure people's wishes and choices were respected at the appropriate time.
- At the time of this inspection, none of the people using the service were receiving end of life care and support. Managers had established relationships with the relevant healthcare professionals that would need to be involved should this need be required.

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 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

- People and relatives spoke well of managers and their leadership. One person said, "[Registered manager] is very attentive and makes sure I get what I need." A relative told us, "I think they manage extremely well. The slightest thing they would look into and deal with for me. They are very open."
- Staff told us they were well supported and felt listened to by managers. A staff member said their feedback about improving aspects of the premises for people had been acted on.
- Managers and the staff team worked closely together sharing important information about people and their care and support needs in a timely way.
- Managers encouraged staff to review and improve their working practices to make sure this was helping people achieve positive outcomes in relation to their care and support needs.
- Staff were enthusiastic about their role and the support provided to people. A staff member told us, "I really like working here. I feel part of a family. I really like the [people using the service]."
- Managers investigated accidents and incidents that happened and made sure people and their relatives were involved and informed of the outcome.

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

- Managers and staff understood their roles and responsibilities to the people using the service.
- Managers notified us promptly of events or incidents involving people. This helped us check appropriate action had been taken to ensure people's safety and welfare in these instances.
- Managers monitored the safety and quality of the service. They undertook checks of key aspects of the service. No significant issues or concerns had been identified through these checks. We noted some of the formats used were checklists and therefore did not help managers to consider areas where the service could improve further.
- We discussed this with managers who told us they would review current arrangements after this inspection to make sure they remained meaningful and supported the service to continuously improve.
- Managers investigated accidents and incidents that happened and made sure people and their relatives were involved and informed of the outcome.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; continuous learning and improving care

- People, relatives and staff were provided opportunities at regular intervals to have their say about the service and how it could improve. Staff used people's preferred method of communication to gain their views so people would not be excluded from having a say in how the service could improve.
- Since our last inspection a new electronic records system had been introduced at the service. Managers told us this had significantly improved their oversight and management of the service. For example, they could now monitor key actions and priorities for the service were being met on time such as staff attendance on refresher training to keep up to date with current practice.
- The new system also enabled managers to see at a glance people's planned appointments and activities over the course of the week and month. Managers said this meant they could better plan for these and make sure people were able to attend these as planned.
- Managers were looking for further ways to improve the service for people. They told us about their plans to extend and refurbish the premises with a view to making this more accessible and responsive to people's changing needs for example larger rooms with en-suite facilities.

Working in partnership with others

- Good relationships had been developed with a range of healthcare professionals involved in people's care. Staff made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current practice in relation to people's specific needs.