



*Making Social Care
Better for People*

inspection report

CARE HOME ADULTS 18-65

Prospect House

**Woodlands Avenue
Goole
East Yorkshire
DN14 6RU**

Lead Inspector
Rob Padwick

Key Unannounced Inspection
7th November 2007 12:45

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Care Homes for Adults 18-65*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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SERVICE INFORMATION

Name of service	Prospect House
Address	Woodlands Avenue Goole East Yorkshire DN14 6RU
Telephone number	01405 761026
Fax number	01405 720112
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Humberside Independent Care Association Limited
Name of registered manager (if applicable)	Mrs Wendy Beck
Type of registration	Care Home
No. of places registered (if applicable)	24
Category(ies) of registration, with number of places	Learning disability (24)

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 12th December 2006

Brief Description of the Service:

Prospect House is situated in a residential area on the outskirts of Goole. The home provides care and accommodation for up to twenty four younger adults who have a learning disability.

The accommodation is split into four separate units each having their own lounge, kitchen, dining area and bathroom facilities. Each unit accommodates six service users and the units on the first floor are serviced by a passenger lift. Service users have been encouraged to personalise their own bedrooms.

The home is situated conveniently for local facilities including shops, hairdressers and the local hospital. The town centre is within walking distance and there is also easy access to local public transport.

Prospect House is owned and operated by Humberside Independent Care Association Ltd, a not for profit organisation.

The standard fee charged by the home is £ 447 with additional charges made where people living in the home require one to one support. Other charges are made for hairdressing, chiropody, toiletries etc.

Prospect House provides information about the home to residents in its Statement of Purpose and Service User Guide.

SUMMARY

This is an overview of what the inspector found during the inspection.

This inspection report is based on information received by the Commission for Social Care Inspection (CSCI) since the last key inspection of the home on 12th December 2006, including information gathered during a site visit to the home.

A questionnaire asking for information about the service was sent to the home manager before the inspection visit and information from this was included as part of the inspection process. Other information used, included feedback from questionnaires sent out to people living in the home, their relatives and professional staff who know them well, together with official notifications received by the Commission for Social Care Inspection about the home.

The inspection visit for this service lasted for 6.5 hours and during this period, time was spent talking with people living in the home and observing their daily lives. Other time involved inspecting the building and looking at care plans and other records and talking to staff.

In order to improve the way the Commission for Social Care Inspection involves and engages with people who use services, someone with experience of receiving similar services known as an "Expert by Experience" assisted with this inspection visit. This person, Victoria Bowman, spoke to people living in the home and helped to look round the home as well as speaking to staff. Victoria Bowman was able to give feedback to the home's manager at the end of her visit and information collected by her is included within this report.

What the service does well:

People living at Prospect House are involved in the process of moving into the home and they are provided with good information about it to help them make a decision about it. People are assessed before they move into the home to make sure it is right for them. The health and personal care needs of people living in the home are met with dignity and respect by staff who know them well and they are supported to take part in a range of activities and make choices about their needs and wishes. The concerns of people living in the home are taken seriously by staff who are recruited well to make sure they are safe to work in the home. Staff are provided with good amount of training to ensure they can do their jobs and the home's environment is warm and clean and safe. To ensure the welfare of people living at Prospect House the manager carries out regular checks to ensure the home is meeting its aims.

What has improved since the last inspection?

The support plans belonging to people living in the home were being reviewed more often to make sure staff had up to date information about their needs. The manager was carrying out regular checks of the medication to make sure it was being given to people living in the home correctly. More training had been given to staff to make sure they were able to do their jobs.

What they could do better:

The range of activities for people living in the home should be better advertised, so they are able to make more active choices about what to do. Choices of food served to people living in the home should be better advertised to help people know what meals will be served. Facilities in the home for people to make drinks, should wherever possible be improved, so they don't have to rely on staff or need to ask for help with this. Information about who is working in the home should be better advertised so people living at Prospect House are able to tell who is on duty.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

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Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Choice of Home

The intended outcomes for Standards 1 – 5 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Prospective users' individual aspirations and needs are assessed.
3. Prospective service users know that the home that they will choose will meet their needs and aspirations.
4. Prospective service users have an opportunity to visit and to "test drive" the home.
5. Each service user has an individual written contract or statement of terms and conditions with the home.

The Commission consider Standard 2 the key standard to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

1,2 and 3

People who use this service experience **excellent** outcomes in this area. People living at Prospect House and their representatives had been involved in the process of moving into the home and a good standard of information was available to help them make a decision about it. The needs of people living in the home had been assessed before they moved into the home to ensure it was able to meet them appropriately. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

We spoke to people living in the home and they and their representatives indicated they had been involved in the process of moving into the home. The service had developed information about it to assist people make an informed choice about it and the Service User Guide was in a pictorial format to help make it easier to understand, which is good practice. The file of a person recently admitted on a temporary basis, contained an assessment of their needs to ensure the service was able to meet them appropriately and comments received from a relative stated "Prospect House offers a friendly, family unit...staff are approachable and very caring...(I) feel reassured and confident about leaving mum in their (respite) care". A Social Services member of staff commented, "all reports and assessments have been comprehensive and more than sufficient in my experience".

Individual Needs and Choices

The intended outcomes for Standards 6 – 10 are:

6. Service users know their assessed and changing needs and personal goals are reflected in their individual Plan.
7. Service users make decisions about their lives with assistance as needed.
8. Service users are consulted on, and participate in, all aspects of life in the home.
9. Service users are supported to take risks as part of an independent lifestyle.
10. Service users know that information about them is handled appropriately, and that their confidences are kept.

The Commission considers Standards 6, 7 and 9 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

6, 7 and 9

People who use this service experience **good** outcomes in this area. Staff were supporting people living in the home to ensure they could make choices about their individual needs and wishes. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home who we spoke to and feedback received as part of the inspection process, indicated staff were supporting people to make choices and decisions about their particular needs and wishes. The Expert by Experience confirmed this by observing how people living in the home had chosen to decorate and personalise their rooms, whilst a member of Social Services staff commented "my service user has always been happy with her options and choices regarding her lifestyle...when any negative responses have been received she has been given other choices". The case files of three people living in the home contained individual support plans, based on assessments of their individual strengths and needs, so staff could assist and enable them to maximise and develop their independence. The support plans were partly in pictorial form to help people living in the home understand them

and evidence was seen of their involvement and agreement with them. Regular daily recording and monthly monitoring of support plans was taking place to ensure they continued to reflect current needs as previously required, and assessments of risk for the individual's were consistent with their individual choices and everyday lives. Information contained in the case files was generally of a high standard, all though some could have been better organised, to avoid duplication of material contained within them. The manager indicated she was aware of this issue however, and stated the development of the case files was ongoing and that more work on these was planned for the future.

Lifestyle

The intended outcomes for Standards 11 - 17 are:

11. Service users have opportunities for personal development.
12. Service users are able to take part in age, peer and culturally appropriate activities.
13. Service users are part of the local community.
14. Service users engage in appropriate leisure activities.
15. Service users have appropriate personal, family and sexual relationships.
16. Service users' rights are respected and responsibilities recognised in their daily lives.
17. Service users are offered a healthy diet and enjoy their meals and mealtimes.

The Commission considers Standards 12, 13, 15, 16 and 17 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

12, 13, 15, 16 and 17

People who use this service experience **good** outcomes in this area. People living in the home were being supported to take part in a range of daily activities in order their lifestyle wishes and needs could be appropriately met. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home we spoke to confirmed they were supported to take part in a variety of social, educational, cultural and recreational activities in both the home and the local community. Information provided by the manager indicated the service maintained good links with local colleges and day centres and that a staff member was employed to arrange and coordinate activities. Routines in the home were flexible in nature and a number of people living in the home were out at the start of this visit at either college or day centres, or undertaking chosen activities as a group or on their own. People who the Expert by Experience spoke to confirmed they were able to choose what shopping they did and that some went out on their own to do

this. Photographs on the wall displayed pictures of people living in the home taking part in variety activities. The Expert by Experience however observed there were no signs showing activities due to take place in the home. The Expert by Experience said "I think there should be an activities choice board so residents can see the choices of activities that are planned...the activities co-ordinator and residents should hold meetings and discuss what activities to do". A recommendation is made about this to help people living in the home make active choices about what they want to do and enable them to participate better in decisions about their lives. The service has an activities and creative arts team which involves both people living in the home and members of the staff team. The manager indicated this group were involved in making items to sell at fundraising activities and some of these were observed around the home (eg. pots for holding plants and items of arts and craft work). People told the Expert by Experience that in the evenings they watched television or did things like playing board games or painting. One person told the Expert by Experience his brother visited regularly and that staff always make him feel welcome. A relative commented "I am always informed about what is going on...I can't praise the staff for all their hard work and dedication". The home has its own minibus to help people get out in the community or go on trips and people we spoke to confirmed they had been on holidays this year to Blackpool, Centre Parks, Thirst and Wales. The Expert by Experience looked around the home but was unable to see any menus and was told by the homes cook that meals served are chosen the night before, instead of relying on a routine for this. A pictorial menu is due to be developed soon to help people living in the home make choices about what to eat. The Expert by Experience thought this was a good idea but said "I think residents should know in advance what meals they are having instead of the night before. I hope the pictorial menus are completed as soon as possible, to help residents see what meals they will be offered". A recommendation is made about this. People we spoke to confirmed the food was of a very good standard, but comments received from a relative indicated a concern that people living in the home may be putting on too much weight. The manager said she was aware of this and the case files inspected contained evidence of people being monitored in this respect. The Expert by Experience found some of the food cupboards locked as a result of this above concern and commented that some of them "should be left unlocked so residents can make drinks without asking for the cupboard to be unlocked". A recommendation is made about this.

Personal and Healthcare Support

The intended outcomes for Standards 18 - 21 are:

- 18.** Service users receive personal support in the way they prefer and require.
- 19.** Service users' physical and emotional health needs are met.
- 20.** Service users retain, administer and control their own medication where appropriate, and are protected by the home's policies and procedures for dealing with medicines.
- 21.** The ageing, illness and death of a service user are handled with respect and as the individual would wish.

The Commission considers Standards 18, 19, and 20 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

18, 19 and 20

People who use this service experience **good** outcomes in this area. Staff were appropriately supporting people living in the home in order that their health and personal care needs were met with dignity and respect. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home we spoke to confirmed they were happy with the way staff were supporting them and that their health and personal care needs were being met. We inspected the support plans belonging to people living in the home and these contained good information concerning their individual needs together with clear guidance for staff on the type of support needed to ensure these were delivered appropriately. The care plans included copies of high quality health action plans, developed in pictorial form to help people living in the home understand them, together with evidence of appropriate monitoring of need and liaison with health professionals as required. A relative commented "my sister has been in Prospect House for a number of years...she has always had the best of care from the staff ...I have no worries" whilst a local doctor stated "I feel Prospect House looks after some very complicated patients very well". Routines in the home were kept flexible to maximise the

ability of people to have control over their lives and specialist equipment had been obtained to enable them to be as independent as possible. Staff were observed interacting with the people living in the home in a friendly and positive manner and the home's records contained evidence of training on a range of topics relevant to the individual needs of those living in the home to ensure staff were able to do their jobs. Staff responsible for the administration of medication to people living in the home had received training on this aspect of practice and policies and procedures were available to ensure they had appropriate guidance to follow. Evidence was seen that the manager was carrying out regular checks of medication administered to people living in the home as previously recommended and a random inspection of the records for these confirmed they were being satisfactorily maintained. . The Expert by Experience said "I think residents should be encouraged to take their medication independently wherever possible" and the case files inspected indicated people living in the home had been assessed for their abilities in these respects.

Concerns, Complaints and Protection

The intended outcomes for Standards 22 – 23 are:

- 22.** Service users feel their views are listened to and acted on.
- 23.** Service users are protected from abuse, neglect and self-harm.

The Commission considers Standards 22, and 23 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

22 and 23

People who use this service experience **good** outcomes in this area. Staff training had been delivered to ensure people living in the home were safeguarded from abuse and their concerns were being listened to and taken seriously. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home indicated they were happy with the service and comments received from their relatives were generally positive in nature. The service had policies and procedures in place to ensure the concerns of people living in the home were taken seriously and a comment received from a relative stated “complaints (are) dealt with quickly and professionally” although feedback subsequently received indicated the outcome for these was not always resolved to the satisfaction of all parties. The home’s complaints book indicated no concerns had been received by the home since the last inspection visit, whilst evidence of expressions of thanks and appreciation were seen. Policies and procedures were in place to ensure people living in the home were safeguarded from abuse and the staff files inspected provided evidence this aspect of practice had been delivered to staff. Discussion with those on duty indicated they were aware of the correct action to take in these matters and the two safeguarding referrals made since the last inspection to Social Services had been satisfactorily resolved. The Provider organisation has a computerised system for the management of personal allowances belonging to people living in the home and a random check of the associated records for these indicated their financial interests were being appropriately protected.

Environment

The intended outcomes for Standards 24 – 30 are:

24. Service users live in a homely, comfortable and safe environment.
25. Service users' bedrooms suit their needs and lifestyles.
26. Service users' bedrooms promote their independence.
27. Service users' toilets and bathrooms provide sufficient privacy and meet their individual needs.
28. Shared spaces complement and supplement service users' individual rooms.
29. Service users have the specialist equipment they require to maximise their independence.
30. The home is clean and hygienic.

The Commission considers Standards 24, and 30 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

24 and 30

People who use this service experience **good** outcomes in this area. People living in the home were provided with a warm and clean environment to ensure it could appropriately meet their needs. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

The home was purpose built and was warm, clean and bright and comfortable. Accommodation is on two floors with access to the top floor via a lift. The Expert by Experience took a close look around the building, which was split into four separate units with each having its own separate lounge and kitchen areas. There was a notice board in the reception area to the home with staff photos displayed. The Expert by Experience said "I like the fact staff had photographs and their names on the wall. I think there should be a staff rota by the photographs so residents know which staff are working". A recommendation is made about this. On the ground floor of the building the Expert by Experience looked in the sensory room, which was equipped with specialist lighting and other equipment, to provide stimulation and relaxation. The Expert by Experience said the sensory room had "a relaxing environment,

with cushions on the floor and slow, soft music playing". However, she also noticed an armchair with a broken armrest and other items that should not have been there. The manager said these were due to be collected and agreed to move them out of the way. The provider company has a programme of maintenance for the upkeep of the building and evidence was seen of this being carried out appropriately. Bedrooms belonging to people living in the home were decorated according to their individual tastes and the bathrooms equipped with special baths and equipment. Aids and adaptations had been provided to assist and promote the independence of people living in the home and a random sample of the records for these indicated they were being serviced regularly to ensure they were kept safe. The laundry area was neat and tidy with facilities and equipment to enable the staff to wash things at appropriate temperatures.

Staffing

The intended outcomes for Standards 31 – 36 are:

- 31.** Service users benefit from clarity of staff roles and responsibilities.
- 32.** Service users are supported by competent and qualified staff.
- 33.** Service users are supported by an effective staff team.
- 34.** Service users are supported and protected by the home's recruitment policy and practices.
- 35.** Service users' individual and joint needs are met by appropriately trained staff.
- 36.** Service users benefit from well supported and supervised staff.

The Commission considers Standards 32, 34 and 35 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

32, 34 and 35

People who use this service experience **good** outcomes in this area. Staff had been recruited properly to ensure they were safe to work with people living in the home and training had been provided to them to ensure they were able to do their jobs. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home we spoke to confirmed staff were meeting their needs. Staff were observed to be attentive in their relationships with people living at Prospect House and discussion with those on duty confirmed they had received training to do their jobs. A Social Services member of staff commented that his "Service user had very positive relationships with staff", whilst a relative commented "staff are approachable and very caring.... I can't praise the staff for all their hard work and dedication". Information provided by the manager indicated that since the last inspection visit new staff are now required to undertake specialist Learning Disability Award Framework accredited training as had previously been recommended and that the 48% of the staff team had now obtained an NVQ qualification at level 2 or above with another 8 registered for this. The Provider organisation has developed a strong induction and foundation programme to ensure staff are equipped to meet the

needs of people living in the home and inspection of their records confirmed that a good range of topics relating to the needs of individual's in the home had been delivered. A recruitment policy and procedure was in place to ensure staff were safe to work with people living in the home. Staff files of those most recently employed indicated this were being appropriately followed, with evidence of positive identity, Criminal Records Bureau and Protection of Vulnerable Adults ("POVA First") checks being carried out, together with references and other required documentation.

Conduct and Management of the Home

The intended outcomes for Standards 37 – 43 are:

37. Service users benefit from a well run home.
38. Service users benefit from the ethos, leadership and management approach of the home.
39. Service users are confident their views underpin all self-monitoring, review and development by the home.
40. Service users' rights and best interests are safeguarded by the home's policies and procedures.
41. Service users' rights and best interests are safeguarded by the home's record keeping policies and procedures.
42. The health, safety and welfare of service users are promoted and protected.
43. Service users benefit from competent and accountable management of the service.

The Commission considers Standards 37, 39, and 42 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

37, 39 and 42

People who use this service experience **good** outcomes in this area. Effective management systems were in place to ensure the welfare of people living in the home. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home that we spoke to indicated the service was being well run. The manager is well qualified and systems were in place to ensure it was meeting its aims and objectives. Prospect House has a fundraising Committee on which relatives and an individual living in the home regularly contribute and discussion with staff indicated the manager was open and approachable in her style. A relative stated, "Prospect House is a happy home...I personally feel this is due to good leadership by the manager". Audits of different aspects of the service were being carried out to assure the quality of the service and regular meetings with both staff and people living in the home were taking

place to enable good communication of ideas. A random sample of the home's maintenance records indicated that effective checks were being carried out to ensure the health and safety of people living in the home.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Adults 18-65 have been met and uses the following scale. The scale ranges from:

- 4** Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion
 "N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
<i>Standard No</i>	<i>Score</i>
1	4
2	3
3	4
4	X
5	X

INDIVIDUAL NEEDS AND CHOICES	
<i>Standard No</i>	<i>Score</i>
6	3
7	3
8	X
9	3
10	X

LIFESTYLES	
<i>Standard No</i>	<i>Score</i>
11	X
12	3
13	4
14	X
15	3
16	3
17	3

PERSONAL AND HEALTHCARE SUPPORT	
<i>Standard No</i>	<i>Score</i>
18	3
19	4
20	3
21	X

CONCERNS AND COMPLAINTS	
<i>Standard No</i>	<i>Score</i>
22	3
23	3

ENVIRONMENT	
<i>Standard No</i>	<i>Score</i>
24	3
25	X
26	X
27	X
28	X
29	X
30	3

STAFFING	
<i>Standard No</i>	<i>Score</i>
31	X
32	3
33	X
34	3
35	3
36	X

CONDUCT AND MANAGEMENT OF THE HOME	
<i>Standard No</i>	<i>Score</i>
37	3
38	X
39	3
40	X
41	X
42	3
43	X

Are there any outstanding requirements from the last inspection? No

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1.	YA12YA12	The registered person should ensure the range of activities available for people living in the home are better advertised, so they can make more active choices about what to do in the home.
2.	YA17YA17	The registered person should ensure that choices of food served to people living in the home are better advertised to help people see what meals will be offered.
3.	YA17YA17	The registered person should ensure facilities in the home for people to make drinks are wherever possible improved so they don't always have to rely on staff or ask for help with this.
4.	YA24YA24	The Registered Person should ensure people living in the home are able to tell what staff are on duty and working in the home.

Commission for Social Care Inspection

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