

# Voyage 1 Limited

# Milverton Road

## Inspection report

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Date of inspection visit:  
26 May 2016

Date of publication:  
20 June 2016

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 12 March 2015 and the service was rated good overall. In May 2016 we received information of concern, these included staffing deployed to be insufficient to meet people's needs; infection control procedures not being adhered to; as well as people who used the service not being involved in making decisions about whom they want to live with and inadequate management of the service. As a result we undertook a focused inspection on 26 May 2016 to look into these concerns. This report only covers our findings in relation to those topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Milverton Road on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Milverton Road is a home for six people with learning disabilities and physical disabilities. The home is managed by Voyage, a large national provider for people with learning disabilities. The registered manager had recently left the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We saw that the service had put risk assessments in place to protect people from others and themselves and care staff spoken with were clear regarding how to follow risk management plans and we observed them being used in practice.

While currently the home was staffed mainly by agency staff, bank staff and only a small number of permanent staff, we saw that the provider had taken action to recruit more permanent staff and was working hard to have a full staff compliment in place. Agency staff spoken with demonstrated a good understanding of people's needs and how to respond to behaviours that challenge the service.

During our visit the home was free of offensive odours and overall it was clean. We observed staff following infection control procedures to ensure that people were not put at risk from an unhygienic environment.

People who used the service were not able to express themselves verbally, but families had been informed of the most recent admission and were able to voice their opinions.

During the day of our inspection the home was well staffed and a temporary manager and deputy manager were put into place until a new manager and deputy had been recruited.

## 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. Individual risks had been assessed and identified as part of the support and care planning process.

There were enough qualified, skilled and experienced staff to meet people's needs. We saw when people needed support or assistance from staff there was always a member of staff available to give this support.

Staff followed appropriate infection control procedures and we found the home clean and free from offensive odours.

### Is the service caring?

Good ●

The service was caring. Where possible people were involved in making individual decisions and relatives were involved in the decision making process.

### Is the service well-led?

Good ●

The service was well-led. The provider had taken appropriate actions to ensure that the service was staffed appropriately and sufficient management cover was provided.

# Milverton Road

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.'

This focused inspection took place on 26 May 2016 and was unannounced.

The focused inspection was carried out by one inspector.

During this inspection we looked at two care records and risk assessments. We spoke to the operations manager, temporary manger and temporary deputy manager. We also spoke with three agency staff, two bank staff and senior member of staff supporting the team and was responsible for leading shifts.

We also observed interactions and support between staff and people who used the service.

# Is the service safe?

## Our findings

We had received information of concern that people who used the service were at risk and a risk assessment for a person recently admitted had not been put into place.

We viewed two separate care folders including the risk assessments. One of the care folders we viewed was for the person recently admitted. We saw that on both occasions up to date risk assessments were in place. These related to a variety of risks, for example behaviours that challenge the service, in-house and community based risk assessments. We spoke to a number of staff who were clear about the risk assessments and were able to explain to us how to appropriately respond to behaviours that challenge the service. Observations made confirmed that staff used the risk management plans when responding to behaviours.

We received information of concern about the amount of agency staff used. The service showed us an action plan dated May 2016. The action plan highlighted the lack of permanent staff and the action taken by the provider. For example, recruitment of new permanent staff had already commenced. The rota viewed for the past four weeks confirmed that one new permanent member of staff had commenced employment on 23 May and was currently undertaking their induction. We viewed the rota which confirmed that the current staffing numbers were four early, three late, one waking and one sleep over staff. This was an increase of one member of staff during the morning since our last inspection. While there was a large number of agency staff in place, we saw that the agency staff used had been consistent. Agency staff spoken with told us that they had received an induction and were able to describe to us in detail the differing needs and behaviour of people who used the service.

Concerns had been raised with us about infection control procedures not being followed and the overall poor cleanliness of the premises. During the day of our unannounced inspection we found the home to be clean and free of any offensive odours. Staff were seen to be cleaning the premises frequently and they were able to tell us of procedures put into place to ensure cleanliness and infection control procedures were maintained. Staff told us that they would follow the person and used disinfectant cleaning materials and regularly clean and disinfect surfaces touched. This ensured that the service was clean and the risk of cross contamination was minimised.

## Is the service caring?

### Our findings

We had received concerns that people who used the service had not been informed of a new person moving in to Milverton Road.

While people who use the service have complex needs and did not communicate verbally. The operations manager told us that the recently admitted person visited the service prior to his admission. This helped the person to make up his mind if he liked the home and gave him an opportunity to meet people who used the service and staff.

The operation manager also told us that people's relative's had been informed about the person moving in and that action had been taken to address the current situation.

## Is the service well-led?

### Our findings

We received concerning information about the registered manager and deputy manager having left the service and poor management arrangements in place.

During our inspection a relief manager was working three days per week working at the home. In addition to this a deputy manager for another Voyage service was on six weeks secondment. We also saw on the rota that another manager was helping out and worked with staff five days per week. Staff spoken with raised no concerns of the support they received from their managers. The operation manager told us that interviews for a new deputy manager had been arranged for week commencing the 30 May 2016 and the recruitment process for a new registered manager will commence in the middle of June 2016. We were reassured by the operation manager that the current manager cover will continue until new permanent managers had been employed.