

Mrs Yvonne Proctor

# The Larkins

## Inspection report

Hill Top  
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### Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

### About the service

The Larkins is a residential care home registered to provide accommodation and personal care to six younger people who have a learning disability. On the day of the inspection five people were living at the home.

The Larkins consists of eight single occupancy bedrooms, of which four had an ensuite. The two-storey property consisted of a lounge/dining area, kitchen, a shower room, laundry and a conservatory. Access to the first floor was via stairs. People had access to a garden at the rear of the property.

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.

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

The provider's quality assurance system was ineffective to take action where risks in relation to water temperatures had been identified. We found the provider had not displayed their latest inspection rating in the home.

The manager was in the process of registering as an individual to take over the registration as provider. We found that not all the people who used the service were aware of who was running the home. People and staff had the opportunity to have a say how the home was run. The manager engaged with other professionals to ensure people received a service specific to their needs. The culture of the home was warm and welcoming.

People told us they felt safe living in the home and staff knew how to safeguard them from the risk of potential abuse. People told us there was always enough staff on duty to assist them when needed. People were supported by staff to keep their home clean and tidy. Lessons were learnt when things went wrong to avoid a reoccurrence. People's prescribed medicines were managed safely and were administered in accordance to the prescriber's instructions.

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](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was Good published (14 February 2019)

#### Why we inspected

We received concerns in relation to the management of the service and the safety and welfare of people who lived at the home. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-Led only.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Larkins on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### 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?

The service was not always safe.

Details are in our safe findings below.

**Requires Improvement** ●

### Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

**Requires Improvement** ●

# The Larkins

## 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 team consisted of one inspector.

#### Service and service type

The Larkins 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 did not have a manager registered with the Care Quality Commission. Registered managers and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The manager was in the process of registering as an individual to take over the registration as provider.

#### Notice of inspection

This inspection was unannounced.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the 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 who used the service about their experience of the care provided. We spoke with service provisions coordinator, the trainee manager, support worker and the manager.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including quality audits.

# 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 now deteriorated to Requires Improvement.

This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Using medicines safely

- Prior to our inspection visit we received concerns from a former employee about the use of 'when required' medicines. These medicines are prescribed to be used only when required. For example, for the treatment of anxiety.
- We found written protocols were in place for the use of 'when required' medicines. Staff demonstrated a good understanding when these medicines should be used and when medical support may be required.
- People were supported by skilled staff to take their medicines as prescribed. Staff told us they had received medicine training and the training records we looked at confirmed this.
- Medicine competency assessments were carried out to review and ensure staff's medicine practices were safe.
- Medicines administration records (MAR) were signed to show when medicines had been given to people.
- We observed medicines were stored appropriately in accordance to the pharmaceutical manufacturer's instructions.

### Assessing risk, safety monitoring and management

- Records showed monitoring checks were carried out of water temperatures. However, where temperatures were high and placed people at potential risks of scalds, action had not been taken to address this.
- The individual risk to people was identified and a risk assessment was put in place to mitigate the risk of harm to them. For example, we observed a risk assessment to prevent choking and staff were aware of suitable meals for people.

### Staffing and recruitment

- People were cared for by staff who had been recruited safely. The manager was able to evidence the undertaking of Disclosure and Barring Service (DBS) checks. DBS helps employers make safer recruitment decisions. This meant the manager was able to demonstrate that staff were suitable to work in the home.
- People told us staff were always available to support them when needed. Rotas showed staff were provided at all times to ensure people's assessed needs were met.

### Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living in the home and staff were aware of their responsibility of safeguarding people from the risk of potential abuse.
- One person told us, "I feel safe because I like everyone here and the staff are nice to me." A different person

said, "I feel safe here because I feel calm here."

- Staff were aware of external agencies they could share concerns of abuse with to protect people from further harm.

#### Preventing and controlling infection

- People told us staff supported them to keep their home clean and tidy. One person told us, "The staff help me to clean my bedroom." Another person told us, "I help to put the washing in the machine."
- We observed the home was clean and tidy. Staff told us they had access to personal protective equipment (PPE) such as disposable gloves and aprons and we observed staff wearing them appropriately. The appropriate use of PPE helps to reduce the risk of cross infection.
- Staff informed us that the manager was the infection, prevention and control (IPC) lead. This meant they were responsible for monitoring hygiene standards within the home.

#### Learning lessons when things go wrong

- Lessons were learnt when things went wrong. For example, where the provider had received concerns about the management of medicines, practices were swiftly reviewed, and a written protocol was put in place to support staff's understanding. Staff told us the concerns relating to the management of medicines had been discussed in a staff meeting and the minutes of the staff meeting evidenced this.



# 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 now deteriorated to Requires Improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The home has been without a registered manager for five months. The manager told us they were in the process of registering as an individual to take over the registration as the provider and our records confirmed this.
- The manager was familiar with the service and had a good understanding of people's care and support needs.
- We found that not all the people who used the service were aware of who was running the home and referred to the service provisions coordinator as the manager.
- The governance was not entirely effective to review, assess and monitor the quality of the service provided to people. For example, we observed water temperature monitoring checks were carried out. However, where it was identified that temperatures were too high, action had not been taken to address this, to mitigate the risk of people scalding themselves. Records showed temperatures as high as 57.6 degree Celsius. We found the water from one shower was very hot to the touch. With reference to the Health and Safety Executive, water temperatures should not exceed 43 degree Celsius. There was no evidence that people had been scalded in the home. Since our inspection visit the manager told us action had been taken to address the water temperature, to ensure it did not exceed a temperature of 43 degree Celsius. They informed us that a risk assessment would be put in place for water distribution in the kitchen where the temperature was higher. This will be looked at during our next inspection visit.
- The manager was not displaying the last inspection report rating in the home which, they are required to do so. The manager had recently taken over the service and assured us action would be taken to display the rating of the last inspection visit.

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

- The manager told us people did not show an interest in pursuing employment or further education. However, there was no evidence that people had been exposed to these opportunities to enable them to have an informed choice.
- The manager described the culture of the home as "warm and friendly." We observed people were comfortable in their environment and one person described living at the home as "calm."

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

- Discussions with the manager confirmed they were aware of the duty of candour. They explained action they had taken to improve medicines practices where concerns had been identified. They liaised with the GP to ensure medicines were administered safely.

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

- People told us meetings were carried out. One person told us, "During the meetings we talk about the things we like to do."
- People were involved in staff recruitment, this enabled them to have a say who worked with them.
- We spoke with people who used the service and staff about equality, diversity and human rights. Everyone said they were treated fairly.
- People were supported by staff to engage with their local community. On the day of the inspection some people were supported to pursue activities outside of the home.

Continuous learning and improving care

- The undertaking of meetings with people who used the service and the staff team enabled the manager to obtain people's views and to improve the service where needed.

Working in partnership with others

- The manager worked with professionals to provide a seamless service for people in their care. These included GP's, psychiatrist, social workers amongst others.