

W H C Services Limited

WHC Offices

Inspection report

Parkview Nursery
Theobalds Park Road
Enfield
EN2 9BQ

Tel: 01992442244

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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

WHC Offices is registered to provide a supported living service for people with a learning disability, autistic people, people with eating disorders, younger adults and people living with mental ill health. At the time of this inspection three people received personal care from WHC Offices.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

People and relatives told us how they or their family member could choose how they wanted to live and had the support they needed to do this. Staff encouraged people's choice and independence. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Right care:

People, relatives, health and social care representatives told us staff were caring and always treated people with respect and empathy. People told us staff knew how to meet their needs, were kind, respectful and well trained. Staff had developed positive relationships with people.

Right culture:

Staff were proud of the support that they provided to people and the positive outcomes that they had observed. The service had an ethos of providing person-centred care to encourage people to lead independent lives.

People using the service were safe. Staff understood how to identify and report abuse. Recruitment practices ensured the right staff were recruited to support people to stay safe. Staff felt well supported and had regular opportunities to discuss their work. Staffing arrangements were flexible to meet people's needs. People received care from staff on a one to one basis and records showed that people received their care in the way they needed to maintain their safety.

People were supported safely with their medicines. Staff completed medicines administration records (MAR)

after giving people their medicines. MAR sheets were audited to ensure people had received their medicines as prescribed.

Care plans and risk assessments were developed from the initial assessment of people's needs. Care plans were comprehensive, individualised and developed with each person. They described the support the person needed to manage their day to day health needs. Risks to people were identified and guidance and control measures were in place to enable staff to support people safely.

People's health and well-being was monitored by staff and they were supported to access healthcare services in a timely manner when they needed to. The service worked in partnership with health and social care representatives to meet people's needs. The service was responsive and quick to adapt to meet people's changing needs. People were supported to have sufficient amounts to eat and drink to maintain a balanced diet.

People were consulted about how their care was delivered and given opportunities to feedback about how they felt the service was doing. There were quality assurance systems in place to monitor the quality and safety of the service and to drive improvements.

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 the service at the previous premises was good (published on 30 May 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for WHC Offices on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

WHC Offices

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in three 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 23 February and ended on 4 March 2022. We visited the location's office on 23 February 2022.

What we did before the 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

During our inspection we spoke with the registered manager, nominated individual and three care staff. We also spoke with one person who used the service and two relatives. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We looked at a range of documents and written records including two people's care records, one staff recruitment record and information relating to staff training and the auditing and monitoring of service provision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

We continued to seek clarification from the provider to validate evidence found. We continued to look at records the registered manager shared with us, and responses from health and social care professionals.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm, abuse and discrimination.
- Staff had completed safeguarding training and confidently described the process they would follow if someone was at risk of harm. Up-to-date safeguarding and whistle blowing policies were in place.
- People and their relatives told us they had safeguarding information, and they knew how and when to raise a safeguarding concern. A relative told us, "(Person) is safe there, it is the best place for him. We have no concerns."

Assessing risk, safety monitoring and management

- Risks to the health and safety of people and the staff that supported them were assessed. Guidance was in place for staff to follow and mitigate risks.
- Personalised risk assessments had been written for people covering a range of risks including eating and drinking, activities, mental health, epilepsy and supporting people when they were distressed.
- Risk assessments were reviewed regularly and updated when changes occurred to ensure staff had access to the most up-to-date information. Updates were also shared with relatives. A relative told us, "They keep us updated and we received copies of the care plan and risk assessment."
- The provider had systems in place to check all tasks had been completed to ensure safe care was being provided.

Staffing and recruitment

- Recruitment procedures were safe. Appropriate pre-employment checks, including Disclosure and Barring Service (DBS) checks were carried out to ensure that only suitable people were employed. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staff rotas correctly reflected the levels of staff on duty. People received the allocated levels of support as detailed in their care plans.
- People's relatives told us they had not experienced problems with staffing. They said, "There is always a staff with (person). We have not experienced any staff shortages."

Using medicines safely

- Medicines were managed safely. There were clear processes for ordering, administration and disposal of medicines. Medicines were securely stored and regularly checked by the staff and the registered manager.
- One person said, "Staff help me with my medicines. They get it ready for me and I take it."
- Staff administering medicines had completed training and had their competency assessed.

- Medicines policies and procedures, as well as good practice guidance was available to support staff in their role. A staff member said, "I completed the training as part of my induction, and I have access to policies for guidance. The manager is very helpful and is available if I need any advice."
- Medicine administration records (MARs) were in place and fully completed. Audits were completed to ensure people received their medicines safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The service had a system in place for recording accidents and incidents.
- The registered manager and staff understood their responsibilities to raise concerns as required.
- Accident and incident records were reviewed by the registered manager to identify any trends, patterns, learning or to identify where future risk could be mitigated.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. 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 needs were holistically assessed to include their physical, mental and social needs. People received care and support in line with standards, guidance and the law.
- People, their relatives, as well as health and social care professionals were involved in the assessment and planning of their care.
- Care plans were individualised and contained details of people's preferred routines and preferences.
- Care plans were reviewed regularly and updated as and when any changes occurred.

Staff support: induction, training, skills and experience

- Staff had the necessary skills, knowledge and experience to perform their roles. A relative told us, "The staff are brilliant. They are experienced and do an excellent job."
- All staff had completed a full induction at the start of their employment and spoke positively about their induction. Training covered a wide range of areas including safeguarding, substance misuse, first aid, managing medicines and epilepsy.
- All new staff spent time shadowing more experienced staff, so they got to know the people before caring and supporting them independently.
- Staff received regular supervision meetings which they found helpful and supportive. These were used to develop and motivate staff, reviewing their practice and checking if staff wanted to progress further or develop specific skills.

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

- People's dietary needs were recorded in their care plans and people were supported to ensure they received good nutrition and hydration. Staff understood people's dietary needs and ensured these were met. This helped to maintain and improve their health and well-being.
- Where people were at risk their care plans contained instructions for staff to reduce the risk, and to prepare meals according to the agreed plan. Where necessary, checks were in place to monitor people's weight.
- A relative told us, "(Person)'s food has to be managed due to the complexity of his medical diagnosis; but staff have been absolutely wonderful with this. (Person) has lost a lot of weight since he's been there, and this has improved his general health a lot."
- People were encouraged to make their own healthy eating choices. One person said, "I choose my food and staff help me prepare it."

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

- The service worked collaboratively with healthcare professionals and specialists. A range of professionals were involved in assessing, planning, implementing and evaluating people's care and treatment to ensure people received the right healthcare. Records confirmed this was the case for ongoing and emerging health issues.
- People received the support they needed to manage their health, including any assistance they needed to arrange and attend appointments with healthcare professional, for example, dental appointments and epilepsy reviews.
- A healthcare professional commented, "I have always found them to be helpful and to take great care of the person whom I see at the hospital. They take excellent records of my patient's seizures and always act in their best interests. They contact me when there are problems and are very helpful in instigating the medical plan (including observations)."

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 MCA 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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.
- A person said, "I am free to do what I want. I go out a lot with staff. I go to bed and get up when I want."
- Staff had received training and understood principles of the MCA and assumed people had the capacity to make decisions, unless assessed as otherwise. People's mental capacity had been assessed and they were not unlawfully restricted.
- Staff ensured people were involved in decisions about their care and support. A person said, "I am free to do what I want. I go out a lot with help from staff."

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 our last inspection we rated this key question good. At this inspection the rating has remained good. 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; respecting equality and diversity

- Staff were motivated about ensuring people were well treated and supported. They knew people's needs and routines well. One staff said, "I have come to know (person) very well, I understand their routines and their needs. We are more like a family now."
- Relatives told us their loved ones were treated with respect, kindness and compassion and had built good relationships with staff. People and their relatives said they were happy with the care they received. One person said, "I feel very happy here; it is my home. I am getting a new car, I am happy" and, "I go out a lot; I like going to the beach and the staff go with me. I know the staff and I get on well with them."
- Relatives comments included, "We feel so lucky to have found them, they are just brilliant at what they do" and "We have seen big improvements since using the service and we are happy."
- The service took a person-centred approach to care and support. Staff were respectful about the people they supported and had completed training on equality and diversity. People's care plans and records set out aspects of their characteristics and preferences to ensure their diversity was respected and their individual needs met.

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

- People's communication needs and any assistance they needed was recorded in their care plans. Care plans were presented in a way people could understand.
- People were given the opportunity to express their views and opinions through regular meetings. They were involved in day to day decisions and had control over their daily routines. People told us they felt comfortable talking and discussing issues with staff.
- Relatives told us that people were involved in making decisions about their care and support wherever possible. Reviews of the care people received were regularly undertaken.

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance in respecting people's rights to privacy and dignity and this was supported throughout people's care records. Staff promoted person-centred values and ensured people were treated with dignity and respect.
- Staff told us they respected people's bedrooms as their private space, seeking permission before entering.
- People were encouraged to develop their independence as far as possible. One person commented, "Staff help me when I need help. I like herbal tea; I do this myself." And "I can dress myself."
- Personal information was kept secure and staff understood the importance of maintaining people's confidentiality.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question good. At this inspection the rating has remained good. 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

- Staff supported people according to their care plans in ways that met people's needs and reflected their preferences. Care plans were individual to people and contained information about their preferences. Staff had the information they needed to support people according to their needs and understood their wishes.
- Care records included people's life histories, important relationships, their likes and dislikes. Care plans focussed on promoting people's independence and supporting them to achieve their goals as well as how they preferred their care and support to be given.
- Relatives confirmed people were involved in assessments and in planning and reviewing care if they wanted to. Relatives we spoke with told us staff knew and understood their loved ones well.
- People's equality characteristics, such as age, gender and disability, were included in their care plans.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Staff understood people's communication needs and used their preferred methods when communicating with them.
- Staff spoke knowledgeably about how people communicated when they needed support, became anxious or wanted time alone.
- The service provided information in an accessible format, where people and relatives needed this, for example, easy read, large print and pictorial formats.

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

- People were encouraged and supported to take part in social events and activities if they wished and supported to take part in a range of activities, hobbies and visits to places they enjoyed. For example, going to the local port to see the ships, going to the beach and playing tennis.
- People were supported to go to the local shops or for a drive in their car. One person told us they spent a lot of their time in their garden when the weather was nice.
- Relatives told us they could visit people anytime and were encouraged to visit regularly to maintain their relationships with their loved ones. A relative said, "I see (person) every week on Sundays and I speak with

(person) every night."

Improving care quality in response to complaints or concerns

- There was a complaint policy and procedure available. People and relatives told us that they knew how to raise a complaint and felt confident any concerns would be listened to and acted upon by the management team.
- The provider had not received any complaints in the last 12 months.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection we found the provider did not have a system of quality assurance surveys, some records were not comprehensive and did not always evidence checks undertaken by the registered manager. At this inspection we found sufficient improvements have been made.

Continuous learning and improving care

- There were clear systems and processes in place for learning from any concerns raised by people and their relatives.
- Regular audits were undertaken across all areas of the service. Areas identified for development and improvement were addressed through an action plan where necessary.
- People's care plans, risk assessments and records were regularly reviewed and updated. Actions were taken promptly to address any issues identified.
- The registered manager was keen to learn and improve the service.

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

- The provider had a system in place for monitoring and managing service quality. This included regular audits, spot checks, care reviews and supervisions.
- The registered manager and staff team understood their responsibilities for ensuring that risks were promptly identified and mitigated. Risks to people's health, safety and well-being were effectively managed through the ongoing review and monitoring of the service.
- The registered manager knew their responsibilities in line with regulatory requirements. They knew to notify CQC of incidents and events occurred at the service.
- The previous inspection rating was displayed within the premises in accordance with regulatory requirements.

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

- The registered manager was aware of and understood the duty of candour. They acted in line with the legal requirements to be open and transparent.
- The registered manager promoted openness and honesty in the running of the service. They were described as, 'approachable', 'supportive' and 'understanding' by staff and relatives.
- Staff were knowledgeable about the people they supported. They told us they felt valued and supported

in their role.

- Relatives told us their loved one's health had improved significantly since receiving support from the service, achieving better outcomes for people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People, relatives and staff were regularly asked for feedback about the service through meetings, phone calls and reviews. This information was used to further develop the service.
- Staff told us their views were listened to and acted upon by the management team. Staff spoke of the open and honest management style and told us they felt well supported. Comments from staff included, "The manager is very approachable and supportive", "The management team is helpful and kind" and "We can always discuss any issues or concerns with the manager."
- People and their relatives were encouraged to share their views, ideas and concerns with staff and the registered manager. A relative told us, "The manager and staff are very nice and respectful, always ready to listen."
- The registered manager and staff worked closely with other agencies to ensure positive outcomes for people. This included working with health and social care professionals, and a commissioner said people received person centred care and support to meet their individual needs.