

Striving for Independence Homes LLP

Honister Gardens Care Home

Inspection report

6 Honister Gardens, Stanmore
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Ratings

Overall rating for this service

Requires improvement



Is the service safe?

Requires improvement



Is the service effective?

Requires improvement



Is the service responsive?

Requires improvement



Is the service well-led?

Requires improvement



Overall summary

We carried out an unannounced comprehensive inspection of this service on 6 February 2015, at which we found three breaches of legal requirements. This is because the provider did not have appropriate arrangements in place to manage medicines; care plans were not always updated when people's needs changed; there were no effective systems for monitoring the quality of care and staff were not receiving regular supervision and appraisal.

After the comprehensive inspection, the registered provider sent us an action plan telling us how they would meet legal requirements and recommendations. We undertook a focused inspection on the 1 July 2015 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Honister Gardens Care Home' on our website at www.cqc.org.uk.

Honister Gardens provides accommodation for up to four people with learning disabilities. At the time of our visit there were three people using the service.

The service had a registered manager. 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 and associated Regulations about how the service is run.

Summary of findings

At our focused inspection on the 1 July 2015, we found that the provider was in the process of implementing their action plan and some legal requirements had been met.

We found that the provider had started to address the shortfalls, but still needed more time to demonstrate the service was well-led. Although audits had been carried out, including surveys, the information gathered had not yet been subject to an analysis, to inform improvement.

We found that the provider had taken action to ensure medicines were handled and administered to people safely and appropriately. PRN medicines were included on the medicine administration record sheets and there were appropriate guidelines for their administration.

We saw from staff supervision records that formal supervision of care staff had been carried out since our last inspection. Appraisals had been scheduled.

The provider had discussed activities with people who used the service and reviewed staff allocation to facilitate a wider range of community based activities.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Action had been taken to improve the safety of people.

We found that the provider had taken action to ensure medicines were handled and administered to people safely and appropriately.

There was a new system for auditing medicines. There were no gaps in the medicines administration charts examined (MAR). MAR sheets tallied with the stocks in the medicines cupboard.

We could not improve the rating for 'safe' from 'requires improvement' because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires improvement



Is the service effective?

We found that action had been taken to improve the effectiveness of the service.

Staff supervision records confirmed formal supervision had been carried out since our last inspection. This was confirmed by staff. Appraisals had also been scheduled.

We could not improve the rating for 'effective' from 'requires improvement' because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires improvement



Is the service responsive?

We found that action had been taken to improve the responsiveness of the service.

All care plans had been reviewed since our last inspections. We noted that care plans had been updated when people's needs changed.

We could not improve the rating for 'responsive' from 'requires improvement' because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires improvement



Is the service well-led?

We found that the provider had started to address the shortfalls, but still needed more time to demonstrate the service was well-led.

The provider was in the early stages of introducing a new quality monitoring system. Surveys had been carried out, however, results had not been analysed to ascertain the effectiveness of the system.

We could not improve the rating for 'well-led' from 'requires improvement' because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires improvement



Honister Gardens Care Home

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.

We undertook an unannounced focused inspection of Honister Gardens on 1 July 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 6 February 2015 had been made.

We inspected the service against four of the five questions we ask about services: is the service safe, effective, responsive and well-led. This is because the service was not meeting legal requirements in relation to these questions.

The inspection was undertaken by one inspector.

Before our inspection we reviewed the information we held about the home including the action plan sent to us by the provider after our comprehensive inspection.

During the inspection visit we spoke with three staff members and two members of the provider's management team. We were not able to speak with people using the service because they had complex needs and were not able to share their experiences of using the service with us. We gathered evidence of people's experiences of the service by reviewing their care records and observing care. Some people had complex needs so we used the Short Observational Framework for Inspection (SOFI) to observe the way they were cared for and supported. SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

Is the service safe?

Our findings

At our comprehensive inspection of Honister Gardens Care Home on 6 February 2015, we found that people were not protected against the risks associated with medicines because the provider did not have appropriate arrangements in place to manage medicines. In addition, there was no system for auditing medicines and people who used 'as required' (PRN) medicines did not have protocols to support staff in their use.

This was a breach of Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 1 July 2015 we found that the provider had followed their action plan to meet shortfalls in relation to the requirements of Regulation 13 described above.

The provider had put in place a system to ensure medicines were handled and administered to people safely and appropriately. PRN medicines were included on the medicine administration record (MAR) sheets and there were appropriate guidelines for their administration.

There was a new system for auditing medicines. This had been implemented two months before this inspection. There were no gaps in the MAR sheets examined. MAR sheets tallied with the stocks in the medicines cupboard.

Is the service effective?

Our findings

At our comprehensive inspection of Honister Gardens Care Home on 6 February 2015, we found staff were not supported by the management team to carry out their roles effectively. Staff did not receive regular supervision and appraisals.

This was a breach of Regulation 23 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 1 July 2015 we found that the provider had started to address requirements of Regulation 23, but still needed more time to complete appraisals.

We saw from staff supervision records that formal supervision of care staff had been carried out monthly since our last inspection. We saw that staff discussed a range of topics including progress in their role and any issues relating to the people they supported. We saw their specific learning and development needs had been discussed. Appraisals had been scheduled with staff.

Is the service responsive?

Our findings

At our comprehensive inspection of Honister Gardens Care Home on 6 February 2015, we had concerns that people who used the service were not offered sufficient stimulating activities in-house and in the community. The provider did not have an activities plan. We also found care plans were not always updated when people's needs changed

At our focused inspection on 1 July 2015 we found that the provider was in the process of addressing the shortfalls we had identified.

People had a designated key worker with whom they had regular one to one meetings. Records confirmed these

meetings and evidenced discussions about matters of importance to the person. All care plans had been reviewed since our last inspections and updated. We noted that care plans had been updated when people's needs changed. For example, one person who had a fall had their care plan changed in light of physiotherapy recommendations.

The provider had a new activity plan for people. This included more activities than we saw in our previous inspection. Activities included bowling, day trips, swimming, and art. The registered manager told us they were exploring people's interests through one to one meetings. We saw from one to one minutes that activities were discussed.

Is the service well-led?

Our findings

At our comprehensive inspection of Honister Gardens on 6 February 2015 we found that people were put at risk because systems for monitoring quality were not effective. The service did not have an effective system of gathering feedback from relatives and other relevant stakeholders. This meant the service was not always able to learn and develop from the views of stakeholders or provide a service more responsive to the needs of the individuals. Also, the service's audit system was not effective. We found the system had not picked up the issues of concern that we found.

We also found the provider did not have an effective system of reviewing and analysing incidents and accidents. When accidents and incidents were reviewed the provider did not always take action to reduce the risk.

This was a breach of Regulation 10 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 1 July 2015 we found that the provider had started to address the shortfalls, but still needed more time to demonstrate the service was well-led.

The provider was in the early stages of introducing a new quality monitoring system. Although, some audits had been carried out, including surveys, the results had not been analysed. Therefore, we could not ascertain if the new system was effective; for example, whether the system could identify areas for development and improvement.

The provider had also introduced a new system for reviewing and analysing incidents and accidents. The registered manager showed us a new form, which staff were to use to provide relevant information such as, injury details and action taken. This process was also subject to management oversight. For example, as part of the process management was required to check if an appropriate risk plan for the affected person was in place; whether the risk plan was reviewed after the incident; and if the care manager was informed. However, this system had not yet been used. The provider told us they had not experienced accidents/incidents since our last inspection.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where legal requirements were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The registered person must protect service users, and others who may be at risk, against the risks of inappropriate or unsafe care and treatment, by means of the effective operation of systems designed to enable the registered person to regularly assess and monitor the quality of the services provided in the carrying on of the regulated activity against the requirements set out in this Part of these Regulations; and identify, assess and manage risks relating to the health, welfare and safety of service users and others who may be at risk from the carrying on of the regulated activity.</p> <p>Effective systems were not in place to monitor the quality and safety of service provided.</p>
Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>The registered person did not have suitable arrangements to ensure that persons employed were appropriately supported by receiving appropriate training, professional development, supervision or appraisal.</p>