

CareTech Community Services Limited

CareTech Community Services Limited - 237 Kenton Road

Inspection report

237 Kenton Road
Harrow
HA3 0HQ
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Ratings

Overall rating for this service

Requires improvement



Is the service effective?

Requires improvement



Is the service responsive?

Requires improvement



Overall summary

We carried out an unannounced comprehensive inspection of this service on 25 and 26 June 2015 at which there was a continuation of two breaches of legal requirements. These related to care workers not being supported to have the necessary knowledge and skills they needed to carry out their roles and people not receiving person centred care and being engaged in meaningful activities. We served two warning notices because of the continuing breach.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches. We undertook a focused inspection on the 9 October 2015 to check that they had followed their plan, met the warning notices and to

confirm that they now met legal requirements. We inspected the effective and responsive domains only at this inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Caretech Community Services Limited – 237 Kenton Road' on our website at www.cqc.org.uk.

CareTech Community Services Limited - 237 Kenton Road is a care home that provides personal care and accommodation for up to twelve people who have learning disabilities.

The service did not have a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission [CQC] to manage the

Summary of findings

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.

A new manager had been appointed but was not registered with the CQC. However, we were told this manager was to leave. The service improvement manager told us that a new manager had been recruited and was due to take up post in November 2015.

At this inspection of 9 October 2015, we found that the provider had followed their action plan, the warning notices had been complied with and legal requirements had been met.

We found that the provider had ensured staff received additional training they needed to support people with complex needs and people with a visual impairment. Staff told us they felt the training was useful and were supported by the management. Additional staff were in place to ensure staff were able to provide the one to one support people needed and to be engaged in meaningful activities. Individual activity planners were in place and were being followed so people had the opportunity to participate in activities of their choice. .

Reasonable adjustments in the home had been made in accordance to people's specific needs and risk assessments were updated accordingly.

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 effective?

The service was effective.

Staff had received the relevant training needed to provide care and support for people with complex needs and people with a visual impairment.

Staff felt they were supported.

This meant that the provider was now meeting legal requirements.

We could not improve the rating for this question to 'good from because to do so requires a demonstration of consistent good practice over time.

We will review our rating for effective at the next comprehensive inspection.

Requires improvement



Is the service responsive?

The service was responsive.

People using the service were receiving person centred care and were engaged in meaningful activities.

There was sufficient numbers of staff which enabled people to have their one to one support and enable them to go out in the community and engage in activities.

This meant that the provider was now meeting legal requirements.

We could not improve the rating for this question to 'good from because to do so requires a demonstration of consistent good practice over time.

We will review our rating for effective at the next comprehensive inspection.

Requires improvement



CareTech Community Services Limited - 237 Kenton 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 was 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 a focused inspection of Caretech Community Services Limited – 237 Kenton Road on 9 October 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 25 and 26 June 2015 had been made.

We inspected the service against two of the five questions we ask about services: is the service effective and responsive. 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, this included the provider's action plan, which set out the action they would take to meet legal requirements.

There were ten people using the service. All the people had learning disabilities and could not always communicate with us and tell us what they thought about the service. Because of this, we spent time at the home observing the experience of the people and their care, how the staff interacted with people and how they supported people during the day.

We spoke with four members of staff and the service improvement manager. We also reviewed two people's care plans, staff training records staff files and records relating to the management of the service.

Is the service effective?

Our findings

At our inspection on the 17 July 2014, we found that the arrangements were not suitable to support staff to deliver care to people using the service safely and to an appropriate standard. Appropriate training about people's complex needs was not being provided to staff. Staff did not feel supported. This meant the provider was in 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.

Following the inspection the provider sent us an action plan setting out the actions they would take to meet the regulation. During our comprehensive inspection on 25 and 26 June 2015, we found the provider had not followed their action plan and actions had not been implemented to meet the regulation. This meant there was a continuing breach of Regulation 23. As a result, enforcement action was taken against the provider for failing to meet the regulation. A warning notice was served. The provider was given until the 1 September 2015 to meet the regulation. An action plan was received by the provider outlining the actions they would take to meet the regulation in the given timeframe.

We carried out this focussed inspection to check what action had been taken. We found the provider had taken steps to meet the regulation. Staff had received the relevant training to help them support people with specific and complex needs and they told us they felt supported in this area.

Records showed and staff confirmed they had received Enabling Communication through Sensory, Intensive interaction and Engagement (ECSIE) training and RNIB (Royal National Institute of Blind People) training to enable them to support people with complex needs. Staff also confirmed that they found the training very useful and it helped them understand people's needs better. One care worker told us "The training was very good and very interesting. They showed us different exercises. There was one where we were blindfolded and we had to follow another person's instructions to go up the stairs. It was

terrifying for me but it made me understand how people that are blind felt and how much they actually trust you. The training showed me different ways of supporting them like taking their hand and explain to them where we are going. We take it for granted that we can see and I really appreciate this training." Other care workers told us "I know now that I need to be constantly speaking with them to let them know what's going on and of any dangers or risks they could face and "The RNIB training was very useful. We understand to look at different things they can touch and different textures."

Staff had received training sessions with a Behaviour Specialist who specialises in identifying communication and interaction techniques. Records showed the specialist had planned further sessions for the remainder of the year and to conduct observations and provide feedback to the provider to ensure the training was being put into practice by staff effectively. When speaking to staff, they were able to tell us about some of the communication and techniques they were now using. Care workers told us "We have had lots of training and can now interact with the people much better especially with the people who are unable to see", "We have sensory items like we have a bag that makes a certain noise and a ball so we get the people to use and feel different textures. The training has really helped us" and "We get the box out with the sensory toys and see which ones they choose, we try different things and different objects and see which ones they like."

Staff told us things had improved and they felt much more supported. Care workers told us "Now we feel supported. They [management] are doing and we are trying. Before we did not have anything. It is much better than before. If we need something, they [management] do it now", "We have that support. We can ask for the training and it gets booked. I am comfortable with asking now", "The training had been very interesting. It has been useful to practice what we have learnt and understand their behaviours. It has helped me a lot and made me more patient. It has been very helpful, before we didn't know anything" and "The training has been really helpful and staff have more confidence. I have seen a big difference and I am happy with the way things are going."

Is the service responsive?

Our findings

At our inspection on the 17 July 2014, we found people were not receiving person centred care that was appropriate to their needs. People using the service were not engaged in meaningful activities. This meant the provider was in breach of Regulation 9 of the Health and Social care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the inspection the provider sent us an action plan setting out the actions they would take to meet the regulation. During our comprehensive inspection on 25 and 26 June 2015, we found the provider had not followed their action plan and actions had not been implemented to meet the regulation. This meant this was a continuing breach of Regulation 9. As a result, enforcement action was taken against the provider for failing to meet the regulation and a warning notice was served. The provider was given until the 1 September 2015 to meet the regulation. An action plan was received by the provider outlining the actions they would take to meet the regulation in the given timeframe.

We carried out this focussed inspection to check whether action had been taken. We found the provider had taken steps to meet the regulation. People using the service were engaged in meaningful activities and steps had been taken to help ensure the care people received was centred around their needs.

During this inspection, five people were at a day centre, three people went out into the community to have some lunch, one person was getting a hand massage and getting their nails done and another person had a foot massage in the home. We observed care workers were positively engaging with people and explaining what they were doing. The person getting their nails done was unable to verbally communicate but was smiling and at one point hugged the care worker.

Records showed there were individual activity planners in place and on the day of the inspection, these were accurately being followed. When speaking to staff they were aware of the activity planners and told us "Activities

are much better now. We have the activity planners which we can follow and you can give them a choice of what they want to do", "We follow the activity plan" and "People are doing more activities and people are going out a lot more."

Records showed and staff confirmed that staffing levels had been adjusted to support staff to engage with people and take people out as some people required one to one support when out in the community. Care workers told us "We have extra staff now so we can spend the one to one time with people", "The one to one time is fixed in the rota now so it does happen", "We have extra staff so there is someone in the room with people and it has relieved the pressure off staff. It has really improved with the extra staff. The extra staff are regular staff and not agency so they know the routine and the people. I don't have to keep repeating myself telling them what to do as I have to with the agency staff" and "We have the time to spend with people and provide the one to one support with the extra staff. I can take the people out and there is no problem." During the inspection, we also observed there was enough staff available to support people in the community as well as in the home.

At our last inspection on the 17 July 2014, we observed there were no reasonable adjustments to address the visual and mobility needs of two people using the service. During this inspection, we found the provider had taken steps and made reasonable adjustments in accordance to people's needs.

There were items placed on the doors around the home so people could see and be able to touch the item to help them know which room they were entering. For example, the office had a pen on the door, the kitchen had a wooden spoon and the laundry room had a sock. For one person using the service who has a particular attachment to shoelaces, they had a shoelace on their door so the person was aware it was their room.

Records showed for one person, an occupational therapist (OT) assessment had been conducted to assess the person's needs and for any adaptations in their living environment. The OT assessments recommendations included grab rails, chair sensor mat and manoy cup which is specially designed cup for people with limited hand and finger movement. The service improvement manager told us they were liaising with local authority for authorisation to purchase these items and get them installed.

Is the service responsive?

Records also showed risk assessments for people's visual impairments and mobility had been completed and updated as per the advice of the OT. Risk assessments showed the possible risks the person could face and the action staff would need to take to help minimise the risk.

There was also some information on the safe practice and risks associated with using equipment such as walking frames which people used because of their limited mobility.