

National Autistic Society (The) Porlock House

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Porlock House is a large detached bungalow with an adjoining cottage and flat, situated in the extensive grounds of Somerset Court. The home is registered to accommodate ten people. At the time of the inspection seven people were living at the home.

The service had not originally been developed and designed in line with the Registering the Right Support guidance. This guidance was implemented in 2017 after the service had registered with us. This was because there were five other registered care homes set in the grounds of Somerset Court in close proximity to Porlock House. The registered manager had personalised the service to reflect the Registering the Right Support Guidance.

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

There were measures in place to minimise risks to people involving the risks relating to choking and individual health needs. Staff were aware of the control measures in place. Systems had been implemented to ensure all staff working in the service were aware of the risks and how to mitigate them. Risk assessments were reviewed and updated where required. Staff confirmed there had been learning following a choking incident in one of the providers other homes.

Rating at last inspection

The last rating for this service was good (published March 2019).

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about a choking incident. A decision was made for us to inspect and examine those risks. The information the Care Quality Commission (CQC) received about the incident investigation indicated concerns about the management of choking. This inspection examined those risks and the management of health-related risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Porlock House on our website at 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 re-inspection 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?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Inspected but not rated

Porlock House

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.

This was a targeted inspection to check on a specific concern we had about assessing risk, safety monitoring and management.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Porlock House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Notice of inspection

We gave 48 hours notice of the inspection to ensure we could manage the risks related to COVID-19.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

Due to COVID19 guidelines around inspecting in a campus setting we did not carry out a site visit to the service. We requested the documentation we required be provided for us at a safe location provided by the service. We reviewed two people's care plans relating to risks. We spoke with the lead manager, area

manager and quality manager.

After the inspection

We spoke with four staff and the registered manager by a video call. We reviewed training records.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to explore the specific concerns we had about the risk of people choking. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- Risks relating to people choking had been assessed and mitigated. Risk assessments were completed and reviewed when required. Staff were aware of the control measures in place.
- People at risk of choking had been assessed by the Speech and Language Therapy Team (SALT) to decide the safest way to support them to eat safely whilst managing a healthy diet. The SALT guidance was available in each care plan reviewed.
- Best practice guidelines are that a SALT assessment should not be transcribed. The risk assessments and care plans were clear about directing staff to the original SALT assessment and guidance.
- Staff told us communication was good in the home and any changes in people's needs or concerns were reported and escalated by the management team.
- We spoke with staff about an incident at one of the providers other homes. They told us that learning from the incident had been undertaken through meetings and supervisions. Staff were able to explain the procedures that should be followed to keep people safe.
- The registered manager confirmed how the provider had shared learning from the incident and they told us how this was cascaded to the team.
- Staff told us that they had completed relevant training relating to people's risks. They said they worked well as a team and ensured risk management guidance was followed.
- The registered manager told us how they had implemented systems to ensure staff had access to relevant information relating to specific risks, including agency staff. They explained how people's risks were discussed at handover, staff meetings and staff supervision.
- The registered manager had oversight of people's risk assessments and the provider had systems in place to monitor these.