

Purley Park Trust Limited

Hazel View

Inspection report

21 Huckleberry Close
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Tel: 01189439463

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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

Hazel View is a residential care home registered to provide personal care for up to five people with a learning disability. At the time of our inspection there were four people living at Hazel View with a fifth expected to move in in the near future.

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 a learning disability or autistic people to live meaningful lives that include control, choice, and independence. People using the service received planned and co-ordinated person-centred support that was appropriate and inclusive for them.

The service was a domestic-sized home on two floors. It was part of small community of homes run by the provider. There were some shared facilities available to people living at the home such as a day centre and club room. Staff did not wear anything that suggested they were care staff when coming and going with people.

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

People received care and support that was safe. People were protected from avoidable harm and abuse. There were enough staff deployed to support people safely. The provider met good practice standards with respect to managing medicines and preventing the spread of infection.

People received care and support that was effective and based on detailed assessments and care plans which reflected their physical, mental and social needs. 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.

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.

There were caring relationships between people and their support workers. Staff were aware of and supported people's emotional needs. Staff respected and promoted people's privacy, dignity and independence, and encouraged people to be as independent as possible.

People's care and support met their needs and reflected their preferences. The provider was aware of and

followed best practice guidance with respect to meeting people's communication needs. People could take part in relevant activities which reflected their interests and prevented social isolation.

The service was well led. The provider focused on meeting people's individual needs and preferences. The provider worked in cooperation with other agencies and worked to continuously improve the service people received. This was supported by effective management and quality systems appropriate to the size of the service.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at www.cqc.org.uk.

Rating at last inspection

The last rating for this service was good (published 19 April 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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?

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.

Hazel View

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

One inspector carried out this inspection.

Service and service type

Hazel View 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.

The service had a manager registered with CQC. 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, including the previous inspection report.

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.

During the inspection

We spoke with people who used the service and two visiting relatives about their experience of the care

provided. We spoke with the registered manager and other staff on duty. We observed the care people received in the shared areas of the home. One person showed us their bedroom.

We reviewed a range of records. This included two people's care records and medicines records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We reviewed the evidence we gathered during the inspection to rate the service according to our published characteristics of ratings.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems, processes and procedures in place to protect people from the risk of abuse and poor care. Staff had training in safeguarding, and were aware of safeguarding issues and how to respond to them.
- The provider had suitable processes if concerns were raised about people's safety. These included working with other agencies such as the local authority, and notifying us as required by regulations when certain events occurred.

Assessing risk, safety monitoring and management

- The provider assessed risks to people's safety and managed risks to keep people safe. People had individual risk assessments in place. For instance, one person liked to go cycling and had a risk assessment in place for this.
- The provider took appropriate steps to make sure the premises and appliances used were maintained in a safe way. There were regular checks on safety equipment, such as fire alarms and emergency lighting. Arrangements were in place to make sure cleaning products which could be dangerous to people were locked away.

Staffing and recruitment

- There were enough staff, with the right skills, to support people safely and according to their needs. We saw staff went about their duties in a calm, professional manner, and were able to spend time with people during the day. The provider had installed assistive technology to call out duty staff if people needed them during the night when there were no staff in the home.
- The provider had a robust recruitment process. This included the necessary checks that staff were suitable to work in the care sector. The provider used values-based interviews to identify applicants with suitable characteristics.

Using medicines safely

- The provider had processes in place to make sure people received their medicines safely and as prescribed. Medicines records were accurate, complete and up to date. The provider had suitable arrangements in place to store medicines securely and according to the manufacturers' guidance.
- People received their medicines from staff who had appropriate training. Staff had received training from the pharmacist supplying people's medicines. This had been followed up in team meetings and supervisions to check staff competency.

Preventing and controlling infection

- The provider had arrangements in place to make sure the home was kept clean and hygienic and people were protected from infections. There was a daily task and cleaning schedule in place for staff to follow. Infection control processes were in line with government guidance.
- Arrangements were in place to maintain high standards of food hygiene. Staff took suitable precautions, such as using disposable gloves and aprons. The provider had installed a dishwasher to improve food hygiene following a suggestion in our last report.

Learning lessons when things go wrong

- The provider had processes and procedures to learn from accidents and incidents. There was an accidents book for staff to record incidents, but these had been rare recently. Staff kept records if people's behaviours changed, and these were followed up and analysed for trends and other factors, such as changes in the weather which might affect people's wellbeing.

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 the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- The service achieved good outcomes for people by delivering care based on effective assessments and care plans. Care plans were person-centred and identified people's individual needs and preferences. The provider reviewed care plans regularly to make sure care continued to be in line with people's changing needs.
- People's assessments and care plans took into account all people's needs. Assessments were based on the provider's standard form supplemented by additional notes made by the registered manager. The provider's policies and procedures reflected relevant standards, guidance and legal requirements.

Staff support: induction, training, skills and experience

- People had their needs met by staff with the right skills and knowledge. There was a wide-ranging training programme for staff which included training in specific topics, such as managing actual and potential aggression. Induction for new staff was based on the Care Certificate which sets out an agreed set of standards for workers in the social care sector.
- The provider supported staff to obtain the necessary skills and keep them current. Staff had individual workbooks and training plans. The provider supplemented these with assessments and competency checks in areas such as handling medicines.

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

- Staff involved people in choices about what they ate. Staff used pictures to help people make choices. These were kept on the refrigerator to remind people of the agreed menu for that day.
- People had a balanced, healthy diet. Staff prompted people to make healthy choices, and to eat reasonably sized portions, while respecting their preferences. People told us they enjoyed mealtimes.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked with other services and homes to make sure people had consistent care when moving between services. When a person who had lived at Hazel View was discharged from hospital to another of the provider's homes, the registered manager and staff worked with staff there to ensure continuity of care. The person's new home was nearby, which meant their friends at Hazel View could visit and sit with them. There was continuity in their social relationships.

Supporting people to live healthier lives, access healthcare services and support

- People's care and support took into account their day to day health and wellbeing needs. Staff supported people to take part in exercise, such as cycling, swimming, walks, and tai chi. The provider's club house

offered opportunities for wider social contact, such as discos, to improve people's wellbeing.

- People had access to healthcare services. People had an annual health check, and access to services such as opticians and dentists. Where appropriate people had regular diabetes checks and appointments with mental health practitioners. Staff escorted people to attend healthcare appointments.

Adapting service, design, decoration to meet people's needs

- The decoration and design of the home met the needs of people living there. The atmosphere was as home-like as possible, with comfortable furnishings, suitable shared areas and private bedrooms. There was an enclosed garden which people could use to spend time together with visitors or to take part in activities.

- People had choice and control over their environment. They could choose the colour scheme in their rooms and staff consulted them about choices in the shared areas. People had personal items in the shared rooms, as well as in their bedrooms.

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 Act 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. In care homes, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards.

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff understood the legal requirements and good practice guidance if people lacked capacity. Mental capacity assessments were in line with the MCA and its code of practice. The provider complied with the Deprivation of Liberty Safeguards if people were at risk of being deprived of their liberty.

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 the last inspection this key question was rated as good. At this inspection this key question remained the same. 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 treated people with kindness and respect. We saw positive interactions between people and staff. People were happy and relaxed around staff.
- Staff supported people with compassion. Staff were aware if people needed help or appeared distressed. One person told us, "If I feel bad, I go straight to staff. They are lovely. They cheer me up and make me laugh."

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

- The provider encouraged people to take part in decisions about their care. Staff held regular house meetings where people living at Hazel View could put anything they wanted on the agenda. If people wanted to, they were involved in staff recruitment interviews. Staff had supported people to go shopping to choose furnishings for the shared area of the home.
- People had a yearly review of their care and support. This included the person, their family, staff who worked closely with them, and representatives from social services. This was a chance to look back on what had gone well in the previous year, and to agree what the person wanted to achieve in the coming year.

Respecting and promoting people's privacy, dignity and independence

- The service focused on helping people to be as independent as possible. Where people had friends in nearby homes they visited each other for social interaction. Staff made sure risk management allowed people to be independent safely.
- Respect for people's privacy and dignity was reflected in their day to day care and support. Staff were aware of needs arising from people's learning disability, and of the danger of accidental discrimination. The behaviour and conduct of staff in the home was respectful to people.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 with detailed information about people's needs, likes, and dislikes across different areas of care. People were very happy with the care they received. One person said, "They look after me very well."
- People's care and support allowed them to have choice and control. The service was based on shared decision making, working to the principle of "nothing about me without me". People had a key support worker, which meant they had an identified staff member they could approach to discuss their care.
- The service had processes and practices in place to make sure any protected characteristics under the Equality Act 2010 were respected. Staff considered people's cultural, spiritual and religious needs, and their care and support plans reflected this.

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 (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager was aware of the legal requirements of the AIS. People's communication support plans included any needs arising from a disability or sensory impairment and steps staff should take to meet them. Relevant information was available to people in easy read formats. If people chose not to speak, staff had guidance on how to interpret their body language and to use pictures to help them express their choices.

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

- The service supported people to take part in activities that were relevant to their interests and social needs. These included social events, such as going to the cinema and discos. People could also pursue hobbies, such as playing a musical instrument and computer games.
- The provider supported people to avoid social isolation. There was a lively atmosphere in the home with frequent visits from people's friends and families. One person had a photo album to remind them of family events they had been at.

Improving care quality in response to complaints or concerns

- The provider had a suitable process and policy for dealing with complaints. There had been one complaint in the year before our inspection. This had been followed up and investigated. The complaints procedure was available to people in easy read format, and staff discussed it with people to make sure they knew how to complain if they wanted to.

End of life care and support

- The service was focused on supporting people to live rich, meaningful lives. Where people were happy to, staff had started to discuss with people what their choices might be when they reached that stage in their lives.

Is the service well-led?

Our findings

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 remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The service was well led in a way which promoted good care, and maintained people's independence, privacy and dignity. These values were understood by people and their families, and the staff team was motivated to achieve them. The registered manager promoted a positive culture through team meetings, supervisions, appraisals and by day to day contact with staff.

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 their responsibilities under the duty of candour. The provider had an open, transparent approach to communication with people and their families.

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

- There was an effective governance and quality system in place. There was a system of monthly compliance checks. The provider's operations director carried out a regular quality assurance review. There had been no actions arising from the most recent review.
- The registered manager was well informed about regulatory requirements. The ratings from the previous inspection were clearly displayed in line with regulations. The registered manager notified us promptly if certain events occurred which providers have to tell us about.

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

- The provider encouraged people who used the service to engage with and be involved with the service. There was a yearly survey which was available to people in an easy read format. Staff supported people to complete the survey if they could not do it on their own.
- The provider had annual surveys to get feedback from families, staff and professionals involved with the service. Feedback from professionals was positive, and stated any recommendations they made were followed up. Feedback from staff referred to good teamwork and was positive about training. Comments by family members included, "[Name] is so happy here. We couldn't ask for a better place."

Continuous learning and improving care

- The provider had systems in place to improve the service. These included consultation with relevant professionals after accidents, incidents or near misses. The registered manager had a service improvement plan, which had been developed with participation from staff.

Working in partnership with others

- The provider worked in partnership with other agencies to meet people's healthcare needs. People had regular healthcare checks with their GP. People had their seasonal flu vaccination, which was included in their GP health care plan.
- The provider had a positive relationship with the local authority, including the learning disability and safeguarding teams.