

Standwalk Ltd

Park Crescent

Inspection report

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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: Park Crescent is a residential care home that can accommodate up to seven people with learning disabilities and autism. The service is located in a large detached house, extended and adapted for the purpose. Accommodation is provided across two floors and people had access to a large garden at the rear of the house.

People's experience of using this service: The service was good at placing people at the centre of the service. The managers and staff of the service had a focus on giving people the opportunity to develop their confidence, gain new skills and become as independent as possible. People were enabled to enjoy outings and activities, and this brought people new confidence.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen. The registered manager looked for ways to improve the service, involving and engaging with the people using the service.

The service worked within the principles of the Mental Capacity Act and made appropriate applications for the Deprivation of Liberty Safeguards. People were supported by staff in the least restrictive way possible; the policies and systems in the service supported this practice. People were encouraged to make choices and have control in their daily lives.

There was a positive culture in the service. People we spoke with felt well supported and thought highly of staff and staff told us they enjoyed working in the service, improving people's lives. There was a relaxed, friendly atmosphere and people living in the home enjoyed each other's company.

The service was safe. Recruitment practices were thorough, and staff were supported through an induction, training and supervision. This included the safe management of medicines, safeguarding and health and safety.

The service responded to people's needs by ensuring support plans were person-centred and contained relevant and up-to-date information. Information was communicated to people in a format that they could understand. Within the home and in the community, people engaged in activities that were meaningful and enjoyable to them. People's end of life wishes were discussed if this was their choice; some information around these discussions was recorded within their support plans.

The provider welcomed comments about the service. They had an accessible complaint's process available to people. The service had not received any formal complaints. There were policies and procedures in place and regular staff meetings were held to help ensure staff were supported to undertake their role effectively.

There were good processes in place to help ensure the quality of the service was monitored. The staff team worked well together and felt supported by the registered manager and the provider.

The provider complied with the legal obligation to display its most recent rating within the home and on their website.

Why we inspected: This was a scheduled comprehensive inspection at the service.

Follow up: We will continue to monitor the service and re-inspect in line with the current rating.

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

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.

Park Crescent

Detailed findings

Background to this inspection

The 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.

Inspection team: The inspection was conducted by one inspector.

Service and service type: Park Crescent 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 the Care Quality Commission. 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 on the first day.

What we did: Prior to our inspection we reviewed all the information we held about the service. This included information from notifications received from the registered provider, feedback from the local authority safeguarding team and commissioners. We reviewed all the information we had received or had been provided with to fully inform our approach to inspecting this service.

The registered provider completed a Provider Information Return (PIR). We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the inspection

Some people who used the service were able to communicate verbally with us whilst others used non-verbal communication methods. We spoke with three people who used the service but also used different methods to help us understand people's experiences. We spent time in the dining room, games room and

garden, observing the care and support people received. We reviewed three care plans and other records relating to care and support. We looked at three records relating to staff recruitment, supervision and training, and various documents relating to the service's quality assurance systems. We spoke with the registered manager a senior support worker and three support workers.

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 has remained the same.

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and we saw people interacted well with care staff, smiling and laughing. Staff we spoke with knew how to ensure people were safeguarded against abuse and the procedure to follow to report any incidents.
- People were protected from potential abuse by the robust systems and processes in place, for example handovers. Handovers occurred between each shift of staff and covered aspects of care including people's health, behaviours, appointments and checks on medicines and monies held in the home.

Assessing risk, safety monitoring and management

- Risks were minimised by use of detailed risk assessments, contact protocols, support plans and bathing strategies, providing directions and guidance for staff. Risk assessments included taking part in a variety of activities outside the home, use of equipment, falls, mobility, nutrition and hydration, safety on transport and specific health conditions. People had been involved in decisions about risk and their safety.
- The premises and equipment were safely managed and maintained to a good standard. Fire safety measures were in place, and staff were aware of the procedure to follow in the event of the need to evacuate the building.
- Staff members we spoke with knew how to support people if they experienced behaviours that may harm themselves or challenge others and how to prevent this from occurring. We saw examples of staff using diversionary techniques, reassuring and encouraging people with person-centred support.

Staffing and recruitment

- The registered provider deployed enough staff to enable people to safely lead the life they chose. Rotas in the service reflected that there were enough staff to enable people to do what made them happy on a daily basis, whether that was in the home or in the community.
- Recruitment procedures were safe and included all the relevant pre-employment checks, to make sure staff were suitable to work with vulnerable adults.

Using medicines safely

- People were protected against the risks associated with medicines because there were appropriate arrangements and robust processes in place. Medicines were stored and administered in line with good practice.

Each person had a detailed medicines care plan including photographs of medicines and details of how people liked to take them, including for 'as required' medicines. All staff had completed regular medicines training and competence assessments.

- Staff told us how they felt protected as two staff always administered medicines to ensure accuracy and to help reduce errors.

Preventing and controlling infection

- The service was clean and well maintained. People were protected from the spread of infections by good staff practice. Staff had access to supplies of personal protective equipment and we saw staff wearing this at appropriate times throughout the two day inspection.

Learning lessons when things go wrong

- The registered manager demonstrated learning from incidents that had occurred in the past at the service so that future risks were reduced.

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 has remained the same.

People's outcomes were consistently good and feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Physical, mental health and social needs had been assessed and care plans included detailed guidance and information to provide direction for staff and ensure care was provided in line with current good practice guidance.

Staff support: induction, training, skills and experience

- Staff were provided with an induction, training, supervision and appraisal to ensure they were able to meet people's needs effectively. Observations were also completed in areas such as medicines administration to ensure staff were competent and confident.
- Staff told us they felt well supported by the registered manager and had regular supervision and an annual appraisal. Some staff we spoke with expressed how they felt the e-learning training could be improved. Training in its current format did not account for all learning styles. Staff told us how they preferred face to face training.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- The service was working within the principles of the MCA. We found DoLS had been applied for where appropriate although there was a delay in some of the authorisations. The staff members we spoke with had a good understanding of the Mental Capacity Act and it was clear from observations and records people's human rights were promoted.
- Best interest decisions were taken where needed and others involved in the lives of the young people, for example health professionals and family members, were included and consulted.

- We found people had their capacity assessed where required, to determine their ability to provide consent in specific areas such as personal care, medical interventions and finances.

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

- People's individual dietary and cultural requirements were catered for and healthy eating was promoted.

Nutritional needs were carefully monitored by staff and action taken if required. Staff we spoke with told us how people were encouraged to eat more slowly to help with digestion. Lunch time was relaxed and people ate the meal of their choice.

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

- The service had good relationships with community health, social work services and police and we saw the advice of health professionals was included in people's care plans and used to help people to achieve their outcomes. Contact with health professionals was always recorded and any advice or guidance fully recorded.

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

- The building was a large detached house, suitable for purpose and had been adapted accordingly. The homely environment was suited to the needs of the people that lived there. Each person had their own bedroom, some with en-suite facilities, that was decorated to reflect their character and personality. There was a large garden to the rear of the home that was well used by people who liked to spend time outside during the day.

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

- The service was proactive in identifying people's health needs and encouraging healthy lifestyles. Records showed people had good access to health professionals when required to meet their care and treatment needs.

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 has remained the same.

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

- There was a visible person-centred culture and staff ensured people were treated equally and fairly. In our conversations with staff it was apparent that staff really cared and wanted to do their best for people.
- People were treated in a kind and compassionate manner. There was a relaxed, friendly atmosphere and people living in the home enjoyed each other's company. We saw lots of laughter and joking between people and staff. One staff member told us, "It's great when you go home and they say I've had a nice day."
- Staff were familiar with people's likes and preferences including the music they liked to listen to, any specific routines they had, their signs of distress or pain and people's individual communication styles. We observed staff using this knowledge to reassure people, make them comfortable and support them in having fun.

Staff were also mindful that people did not always have access to a lot of money, but this did not detract from the care and support that was provided. Staff explored the different options available in the community so that people were given the same opportunities to go out and enjoy themselves, doing things that were either free or provided good value for money.

- Staff demonstrated they were committed to respecting people's equality, diversity and human rights. People led busy lives in the way they wanted to. People had explored things that had not worked out, but staff ensured people remained as positive as they could. People had developed confidence to try new activities and had achieved their goals. The registered manager and support staff were pleased and proud of people's achievements in the time they had lived at Park Crescent.

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

- People were involved in decisions about their care. Staff demonstrated a good knowledge of people's individual mannerisms, people's preferred routines and how they communicated.
- There was a welcome pack for people new to the service which included a guide to the service and guidance around how to make a complaint.
- We saw how the registered manager and staff positively responded to people who were unsure but wanting to make specific decisions about their care. Any requests for further information and guidance were sourced and presented in meaningful ways to people to help them to do this.

Respecting and promoting people's privacy, dignity and independence

- There was plenty of space in the home for people to spend time alone, but people were also able to easily socialise with others.
- Staff displayed a good understanding of how to treat people with dignity and respect. Staff we spoke with explained how this included ensuring the little things were right every day, such as making sure people were

appropriately dressed depending on the activity or the weather. Staff were fully aware of people's right to privacy. One person living at Park Crescent told us, "They [staff] are not allowed in my room without permission," and staff respected this.

- People had developed new skills and achieved greater independence. One person we spoke with told us they were having lasagne for tea and said, "I like lasagne; it's on the menu. I'm helping tonight. Staff watch me in case I cut myself with a knife."

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.

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Care plans were highly person centred and the person was placed at the heart of the plan. It was clear from our observations and records we saw that people were treated as individuals and support was delivered according to their specific needs and wishes.

- Where people expressed the wish to transition to a different service the manager put wheels in motion to make this happen and changes were managed sensitively.

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

- Staff placed great importance on giving people choice and control. People were enabled to lead fulfilling lives. People were able to continue with past hobbies or pursue new interests. People told us about their activities and social interaction with each other and within the wider community. People had trips to the shops, cinema, gym, airport, local discos and various social groups within the community. One person told us, "I am happy here. They take me out to places I want to go."

- Staff were committed to working with people and helping them maintain relationships that were important to them. The service went out of their way to promote these. One person had recently enjoyed a meal out with family members. The manager had received a compliment from the family as the event had been a lovely, positive experience for everybody.

- People had identified their own goals and reviewed their achievements on a regular basis with staff. Person centred plans contained photograph of goals and outcomes that had been achieved, for example going on holiday, out for walks, singing and dancing.

- Some people were supported to access voluntary work placements and/or educational opportunities.

Meeting people's communication needs

Since 2016 onwards 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 service produced a range of information in easy read format. Information about specific health conditions was produced in easy read, colourful format with pictorial representations. Much of the information within the care plans, such as health action plans was produced in this way to ensure people were fully involved in their support planning and understood.

- Communication passports were used within care files to guide staff how to read body language, mannerisms and gestures for individuals where required.

Improving care quality in response to complaints or concerns

- The registered manager created an open culture, where complaints and concerns were welcomed and learned from. A complaints procedure was in place and had been shared with people and their relatives.
- There was a complaints log with information about actions taken and outcomes. This log was analysed to inform improvement to service delivery.

End of life care and support

- End of life care was not currently being delivered at the home. Discussions about people's end of life plans and wishes were recorded if people chose to do so. This document was in easy read format and pictorial format so that people could be involved. The registered manager had sourced additional information from various sources following further requests about end of life choices. They planned to incorporate the information into an easy read booklet so that people were further reassured, could make specific choices.

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

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

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The service was continually being developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. Records showed staff had listened to people, their relatives and other health professionals.
- The registered manager of the service spoke passionately about their commitment to people living at Park House and told us how people had progressed since moving into the home. Initially some people had required two to one support, but at the time of this inspection this was not needed. People had more freedom and independence. People were supported to be as independent as possible with the least amount of support required. This helped empower people to be as self-sufficient as possible and encouraged confidence.
- The registered manager was responsible for another service owned by the provider, but this did not detract from the quality of care provided to people or the support made available to staff. Staff praised the registered manager and the provider for the positive leadership and support they received.

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

- The manager and staff continued to review the service and explored new ways with people to help fulfil their potential. Good governance was fully embedded into the running of the service. Quality assurance processes were thorough. The daily and weekly checks done by staff helped to identify any potential errors or risks early on, so that appropriate action could be taken. Audits of the service helped drive improvements.
- The registered manager understood their legal obligations including notifying CQC of any significant incidents such as death notifications and safeguarding incidents and they had notified us (CQC) appropriately.

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

- The lives of people were enhanced by staff who were their partners in care and respected their choices and decision making.
- There was a very positive team working culture and staff we spoke with felt well supported by the manager and the organisation. One staff member told us, "The manager has an open-door policy. They are

really approachable." They went on to name other members of the provider's management team who were supportive of staff. ●

People were supported to use local community facilities, such as shops, cafes, parks and leisure facilities. This helped to promote good community relationships and inclusion.

Continuous learning and improving care

- Staff supervisions and meetings took place regularly and helped ensure staff had opportunities to raise concerns and make suggestions. An employee of the month scheme provided acknowledgement of staff who had gone above and beyond their remit. The service provided staff with access to a support helpline service, including free legal advice, counselling and health advice.
- The registered manager was available to support staff at any time of the day or night.
- Surveys were sent out annually to assess people's level of satisfaction with the service. Feedback from these demonstrated a high level of satisfaction with the service. A staff member told us, "Everyone is quite happy. Every day is different. I like it. [We're] like a family."

Working in partnership with others

- The registered manager was committed to working collaboratively with outside agencies, professionals and families to meet people's needs and drive up the quality of the service.
- The provider complied with the legal requirement to display its most recent rating within the home and on their website.