

Clearwater Care (Hackney) Limited

Forest Haven

Inspection report

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Date of inspection visit:
16 May 2023
01 June 2023

Date of publication:
12 June 2023

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence, and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

About the service

Forest Haven is a 'care home' for people who have a learning disability. The service accommodates a maximum of 5 people. At the time of our inspection, there were 4 people living in the home. People using the service had been living at the home for many years. Most of the staff team had also been working at the home for some time and everyone knew each other well.

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

Right Support:

There were suitable amount of trained staff working at the service to meet people's individual needs. The provider carried out employment checks to ensure that staff were recruited safely and had the right skill mix to support people who lived at the home.

The service took measures to help prevent the spread of infections. Medicines were managed in a person centred and safe way and staff ensured that people received regular medicines reviews by their health professionals. People who used the service 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.

Right Care:

People spoke positively about the service and told us that they were treated with kindness and their privacy was respected by staff. Relatives were very complimentary about the service. They told us that they felt the service supported their loved ones to express their views and they were involved in making decisions about their support with help from their families. People's support plans and risk assessments were well detailed and written in a person-centred.

Right Culture:

The service carried out a range of audits to ensure a good quality service was provided. Staff understood people's needs well. This enabled people to receive a good service, which empowered people and the care was tailored to their individual support needs.

The staff turnover at the service was very low, which supported people to receive consistent care from staff who knew them well.

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

Rating at last inspection

We last inspected this service in May 2018 where it was rated 'good' overall.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Forest Haven on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 caring findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Forest Haven

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by 1 inspector.

Service and Service Type

Forest Haven is a care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement dependent on their registration with us. Forest Haven is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 19 May 2023 and ended on 1 June 2023. We visited the service on the 19 May 2023.

What we did before the inspection

We reviewed information we had received about the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers 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 the manager. We reviewed a range of records. This included 4 people's care plans, risk assessments, 3 recruitment records, 2 quality audits, 3 daily records, and staff training records. We spoke with 1 person, 2 relatives and 3 care staff.

We reviewed a variety of records relating to the management of the service, including policies and procedures, staffing rotas, accident and incident records and safeguarding 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. At this inspection, the rating has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm due to staff's knowledge and the training that they received, which helped protect people from abuse.
- People and relatives told us people were kept safe. One person told us, "Staff help me to keep safe and help with the things that I can't do for myself, like cooking."
- The provider also had policies and procedures in place that helped to reduce identified risks to people. People's risk assessment was reviewed on a regular basis by staff and other professionals if required.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People lived safely and in a well-maintained living environment, this was due to good monitoring and assessments that were in place. For an example, the registered manager completed environmental audits and risk assessments to ensure that concerns were picked up and addressed appropriately.
- People and relatives told us that they were involved in reviewing support plans and risk assessments. One person said, "Staff help me to write down in my plan the things I want to do and achieve."
- People's needs and risks were assessed appropriately, and support plans were completed to ensure that staff were clear on how to give safe care to people.
- The provider completed environmental risk assessments, which helped ensure that the environment was safe for people and staff. For example, those risk assessments covered, fire and trip hazards and risks for staff using equipment.

Staffing and recruitment

- Staff were recruited safely to ensure that staff had the right skills and experience to meet people's needs. The checks included pre-employment checks, which were conducted to ensure staff were suitable for the role. This included employment references, proof of identification and right to work in the UK. Disclosure and Barring Service (DBS) checks had been completed. A DBS check is a way for employers to check staff criminal records, this helps to decide whether they are a suitable person to work with vulnerable adults.
- People and their relatives told us they were supported by regular and familiar care staff and cover arrangements were in place. One relative said, "I have always seen regular staffing at the home. There have been some new staff at times, but it does not happen very often as the staff team have worked there for a long time, which is good for my [relative] and the other [people] that live there too."
- The registered manager told us that people were involved with staff recruitment. For an example the registered manager said, "There are 2 parts of the interview process, which is that I will interview the candidate first and if I felt that they were suitable then I will invite them to attend a visit to the home to meet people, which I then observe how they are interacting and how people are interacting with the candidate."

Using medicines safely

- People using the service, were supported by staff to receive their prescribed medicines safely and in private if they wished to. One person said, " Staff help me to take my medication in my room."
- The provider had a medicines policy in place and staff were trained and assessed before they administered medicines to people. There were also regular medicine audits completed by the management team to ensure errors or concerns were identified and addressed appropriately.
- We reviewed people's medicine administration records (MAR) and saw these had been correctly completed.
- The service ensured people's anxieties and behaviours was not controlled by excessive and inappropriate use of medicines. Staff understood the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles. One staff said we support [people] to see their [health practitioners] on a regular basis to review their [medicines]."
- During our inspection, we saw people's review notes from health specialists, who had reviewed people's medicines.

Preventing and controlling infection

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was admitting people safely to the service.
- During our inspection, we saw staff using the correct personal protective equipment (PPE) effectively and safely.
- All staff were trained in infection prevention and control, including the correct use of PPE. Training records confirmed this.
- The registered manager told us that staff carry out weekly audit checks to ensure that the service had the right amount of PPE in stock.

Visiting in care homes

- The provider supported people to maintain contact with their family and friends and they were welcome to visit the home. Relatives confirmed this during our discussions with them. One relative said, "We are always made to feel welcome by staff. The manager and staff are very good at keeping us updated with any changes."

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 our last inspection, we rated this key question good. At this inspection, the rating for this key question has remained good. 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 provider had a comprehensive system in place to assess people's needs prior to people moving in to the service. The assessments covered a range of areas, for example, the person's physical and mental health needs as well as people's choices and goals.
- People's support plans were personalised and tailored to the individual person. People and relatives told us they were involved with developing their support plans. One relative said, "From day one we have always been included by staff to add information to our [relative's] support plan, this includes attending reviews and being invited to any care assessment that takes place."
- The service ensured people had up-to-date care and support assessments, this included people's medical assessment and communication support needs.
- The service worked closely with their internal positive behaviour support team, to ensure that people's functional assessments were completed for people who needed them. This ensured that staff understood the areas required, to help manage people's anxieties in the right way and helped give positive outcomes to them.

Staff support: induction, training, skills and experience

- People who used the service, were supported by an experienced staff team who had the skills and received the relevant training, to support people with a learning disability as well as people who were autistic.
- People and relatives told us they felt staff were skilled and experienced to support people appropriately. One person told us, "Staff know me well and how to help me. They listen to me if I'm feeling unhappy about something."
- The service ensured that people were supported with reasonable adjustments to meet their individual needs, and to ensure their rights were respected. This was due to staff knowledge and skills, which had been developed by the support from the provider.
- Staff told us that they received regular supervisions and yearly appraisal from the registered manager. One staff member said, "The manager is very supportive, I can speak to them whenever I need to. There is also a on call manager that we can call if we need to"
- Training records showed that staff received training in risk assessing, health and safety, medicines, first aid, food safety and infection control.

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

- People received support to eat and drink enough to maintain a balanced diet..

- People told us that they were given a choice of different meals and drinks that they chose to have. The food menus confirmed this. During our inspection, we saw that staff were supporting people to make choice on what they wanted to eat for lunch.
- Staff received training to support people to avoid malnutrition and dehydration. One staff said, "It's important to ensure that [people] eat healthy and choices are given. The training help me think about the different ways I can support [people] to eat and drink more healthily."
- The service supported people with complex needs to receive support to eat and drink in a way that met their personal preferences.
- Staff supported people to eat and drink in line with their cultural preferences and beliefs. People's support plans confirmed this.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The provider supported people to record health action plans and health passports, which were used by health and social care professionals to ensure people received support in the way they needed to.
- People told us that staff supported them to contact their health professionals when required. One person said, "If I was unwell the staff would call my doctor."
- People were supported by staff to attend health care appointments for their annual health checks.
- The registered manager told us they work closely in partnership with other health and social care professionals when required and contact health professional if staff identified any changes to a person's needs.
- Staff were confident on how to support people to access their healthcare practitioners if needed. For example, one staff told us "I support [people] to receive health check-ups and to attend their hospital appointment."

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

- The service was homely, and the internal decoration of the home was adapted to meet people's sensory needs. For example, the home was well maintained with good quality furnishing. All bedrooms had an ensuite shower room and one person's shower room was adapted to have a bath due to their personal preferences.
- People were able to personalise their rooms and staff involved people in making decisions relating to the interior decoration and design. For an example one person told us, "I was supported by staff to choose the colours that I wanted for my room and were I wanted my things to be."

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 MCA 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 decisions made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty so that they can receive care and treatment when this is in their best interests and legally authorised under the Mental capacity assessments (MCA).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service empowered people to make their own decisions about their care and support and operated

within the legal framework of MCA. There were also MCA assessment in place for people that were assessed not to have capacity.

- People and relatives told us that staff always gained people's consent before care was delivered. One person said, "Staff always ask me before helping me with my support."
- Staff had a good understanding of people's capacity to make decisions. This was through verbal and non-verbal communication. For example, one staff said, "I always try to break my communication down to easy steps so [people] can have the time to think about the tasks that they are doing. If a [person] does not have the capacity to make decision then the manager will arrange a meeting with their relatives and social worker to help if this is right for the [person]."
- Staff received MCA and DoLS training, which supported them to develop their skill and understanding about the principles of MCA.

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 our last inspection, we rated this key question good. At this inspection, the rating for this key question has remained good. 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

- People were matched well with their care workers, and we saw that people were relaxed and engaged well with staff. One person told us, "I like the staff that work here. They are nice to me"
- Staff demonstrated that they knew people's support needs well, as we saw positive interaction between both staff and the person being supported.
- All staff had completed equality and diversity training and people's spiritual and cultural needs were respected. One staff said, "It's important to respect people's choices around their [cultural] beliefs as this is what makes [people] individual."

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

- During our inspection, we saw that people were given time to listen and process information and respond to staff in their preferred method of communication. For example, a staff member was supporting a person to plan their daily activity, this was done by the staff breaking up each step of the activity so that the person had time to understand and process the information that was given.
- People felt listened to and valued by staff. One person told us, "I meet with my keyworker to talk about the things I want to do."
- People were empowered to make choices for themselves, and staff ensured they had the information they needed. For example, one staff said, "Each [person] we support has their own way of expressing their views. We use different way of helping people to tell us what they want to do and how they want their support given, this can be by using photos or by using the persons iPad."
- Care plans reflected people's views on how their care is to be given.

Respecting and promoting people's privacy, dignity and independence

- The service supported people to complete a skill teaching plan, which identified people's goals and aspirations and promoted their independence. During our visit we observed people completing task independently for an example one person was making a cup tea for themselves and staff were around to support if required.
- People and relatives told us they felt that staff respected their privacy and dignity when providing care and support. One person said, "Staff will always knock on my door for me to open. They will never just walk in."
- Staff understood when people needed their space and privacy. One staff told us, "I will always knock on the [persons] bedroom or bathroom door and wait to be invited in. Also, when I support [people] with their personal care, I will always tell the person what I am going to do before carrying out the task and then leave the [person] to do the areas that they can do themselves."

- Staff received equality and diversity training.
- People's personal data were kept secure, and the provider understood the importance of keeping people documents secure to ensure confidentiality was maintained.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's needs were met through good organisation and delivery.

This key question has been rated good. 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

- The service focused on people's quality of life outcomes, which were regularly reviewed and adapted as required. This method helped to ensure that people were able to make choices and gave control to the person, so they were able to be fully involved in their care.
- People and relatives told us they were involved in reviewing care plans to ensure that they were up to date.
- During our inspection we review people's support plans, which we found them to be person centred and personalised to people's needs.
- Staff were knowledgeable about adapting their support to people's individual needs. One staff said, "It is important to get to know [people's] personal choices and preferences. As well as understanding how [people] want their care given to them."

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. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The service ensured people had access to information in a format they could understand. For example, support plans had pictorial and written information. Staff also supported people to use assistive technology, such as iPads that read information.
- People had individual communication plans and passports that detailed people's preferred methods of communication. This gave staff clear guidance on how to effectively communicate and support people.
- The registered manager were able to demonstrate a clear understanding of their responsibility to comply with the (AIS). For example, the registered manager said, "We use a range of tools to help communicate with people and for people to communicate to staff. This can be by using assistive technology or using social stories. Support plans are also written in a format that the individual person will understand."

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

- People were supported to participate in their chosen social and leisure interests. Each person had an activity plan, also daily notes were in place for staff to record people's outcomes.
- People were encouraged and motivated to develop and maintain relationships that were important to them. One person said, " I am supported by staff to contact my [relatives] if I wish to."
- The registered manager told us how the staff team support people to achieve their goals and aspirations and becoming a part of the wider community. For example, the registered manager said, "1 person expressed their wishes to go on holiday with the staff and their family. Therefore, the staff worked closely planning the holiday with the person and their family, to ensure the holiday went well."
- Staff told us they supported people to access the community without barriers getting in the way. For example, 1 staff said, "When the [person] moved into the home they only had use of the family's vehicle to access the community, this was due to the person's anxieties. Therefore, staff worked alongside there positive behaviour support team to help develop the persons confidence, so they were able to access public transport and not be reliant on using a vehicle, which was not always available and restricted them to go out."

Improving care quality in response to complaints or concerns

- Staff explained to people, how they could make complaints if they wished to. For example, one person told us, "Staff always listen to me if im upset and they help me to sort out the issues."
- The provider had a complaints policy and procedure in place, which was accessible in both written and pictorial format. There had been no complaints since the last inspection.
- The service were committed in supporting people and relatives to provide feedback on a regular basis, so they could ensure the service functioned well.
- The staff spoke positively about the importance of continually improving the quality of the service. For example, the registered manager told us, "It's important that we as a team don't become complacent and that we are always looking at ensuring people receive good quality care and support."

End of life care and support

- At the time of inspection, no one at the service was being supported with end of life care.
- The provider had an end of life care policy, which gave guidance to staff about how to provide this type of care sensitively.

Is the service well-led?

Our findings

Well-Led – this means 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 good. This meant that 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 registered manager worked hard to develop a good culture within the team, which staff felt valued and supported. This approach supported to promote people's individuality, rights and enabled them to develop as an individual.
- People and relatives spoke positively about the management and staff team. For example, one person said, "The manager is very friendly and helpful he always says hello to me and asked how I am."
- Staff felt comfortable in raising concerns with the management team. One staff told us, "I know I can speak to the manager if I need to and discuss any concerns to them without feeling that I should not be bothering them. The manager has also helped me to develop my skills and gain confidence."
- The service told us how they worked with external professionals to help achieve positive outcomes for people. For example, the registered manager told us, "We work with a range of professionals such as, GPs, the psychology team, speech, and language. We can also complete referrals if we need to."

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; Continuous learning and improving care

- The registered manager was aware of their registration requirements with CQC and of their duty of candour. People and relatives spoke positively of the management team. One relative told us, "The staff are very good, I have no concerns. My [relative] seems very happy at the home and [they] are always pleased to go back after visiting me."
- The provider had up-to-date policies and procedures in place and staff understood their roles, and responsibilities in regard to duty of candour. One staff told us, "As part of staff induction, we discuss the importance of duty of candour and how to report concerns. I feel very confident on the actions I would need to take if something went wrong, as I would always hold my hands up and inform the manager if something did not go to plan."
- The service had systems and processes in place for monitoring the quality of the service and these were operated effectively. The systems included surveys that was sent to people who used the service and their relatives, as well as the staff and stakeholders. The registered manager also completed, care plans, medicines and IPC Audits and spot checks were carried out to improve and help develop the running of the service.
- The provider had systems in place to review accident and incident forms that staff completed and sent to the registered manager, who reviewed them and put the necessary actions in place to help prevent re-occurrence. The learning from them were also fed back to the staff team.

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

- The registered manager had the skills and knowledge to perform their role well. They also had a good oversight of the service. Staff and relatives knew how to contact the management team if they needed to.
- The provider's governance system worked appropriately, which helped analyse any learning that were needed to help improve the running of the service. This consists of regular audits being completed by staff and the provider.
- The provider had systems in place to help develop staff. This comprised of inductions for new staff, regular supervision and appraisals to help support the delivery of safe and good quality care.
- The service had policies and procedures in place, which reflected good practice guidance and legislation. Those were reviewed regular to ensure they were up to date.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service had systems in place to ensure people and those important to them, had a voice regarding the running of their home and how they wanted their support to be delivered.
- The registered manager recognised the importance of monitoring the service to help make improvements.
- The service worked well in partnership with other agency's such as, health and social care organisations and they knew how to access the advocacy service if people were to need this support.