

# Watford And District Mencap Society Hillside

## Inspection report

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Date of inspection visit:  
08 February 2023  
16 February 2023

Date of publication:  
09 March 2023

## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

## Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

Hillside is a care home providing personal care and accommodation for 6 people. The home is a house with a garden and access to the local town. Most people who were living at Hillside had physical and learning disabilities, including autistic people. The home can support up to 7 people.

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

This was a targeted inspection that focused on the safe use of medicines, risks to people being managed safely, infection control, person centred care and the management of the service. Based on this targeted inspection:

#### Right Support:

People received safe care at the home and the manager had updated risk assessments and care plans to guide staff how to support people safely. Medicines were administered to people safely, for the most part and immediate action was taken where this was not the case. Staff had a good understanding of people as individuals and external professionals were contacted to support people if this was needed. 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.

#### Right Care:

The service looked clean and well looked after and work had started to decorate the service. Staff were confident when supporting people and spoke with them with kindness and compassion. The manager and staff team had started to support people to set goals and achieve their ambitions. Work had also started to collect feedback from people in meaningful ways that made sense to them.

#### Right Culture:

There was a positive culture at the service. Staff enjoyed their job roles and people were happy and relaxed being supported by staff. The provider and manager had taken the findings from our last inspection seriously and put numerous measures in place to improve the quality of the support people had and the

culture of the service. The provider and registered manager acknowledged that improvements could still be made and had plans in place to implement these.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection and update

The last rating for this service was inadequate (report published 18 November 2022). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

#### Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulations 12, 9 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. We had concerns about risk assessment and management, medicines management, infection control, people receiving person-centered care and how the management team were monitoring the quality of the service. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

We use targeted inspections to follow up on Warning Notices or to check 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.

#### Follow up

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

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

## 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 inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Details are in our safe findings below.

**Inspected but not rated**

### Is the service well-led?

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Details are in our well-led findings below.

**Inspected but not rated**

# Hillside

## 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 completed by one inspector.

#### Service and service type

Hillside is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Hillside 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 manager in post who had started the process of registering with the CQC.

#### Notice of inspection

This inspection was unannounced. Inspection activity started on 08 February 2023 and ended on 16 February 2023. We visited the home on 08 February 2023.

#### What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We spoke with the local authority to gain their views of the home and we reviewed the records we hold. We used all this information to plan our inspection.

#### During the inspection

We spoke with 5 people who lived at the home, but some people were unable to talk with us, so we spent time seeing how staff supported people in their day to day lives at the home. We spoke with four members of the care staff, the manager, operations manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We looked at a series of documents on each visit to the home. These related to fire safety checks, risk assessments, care plans, and medicine records for five people who lived at the home.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We had concerns around risk assessments and safety of people, medicines management and infection control. We will assess the whole key question at the next comprehensive inspection of the service.

### Assessing risk, safety monitoring and management

- The manager and nominated individual had reviewed people's risk assessments to help ensure they gave staff detailed guidance to support them safely. Some of these risk assessments would still have benefitted from more detail. The manager assured us they would continue to review these.
- People's care plans had been updated to help ensure staff knew how to support them safely. The manager had made sure people had care plans and risk assessments in place for all of their support needs. One person said, "[Staff] know how to help me with [personal care] and I feel very safe."
- The manager and nominated individual had improved procedures relating to fire safety. Regular fire drills and tests of fire-fighting equipment now took place. The manager had updated people's risk assessments in relation to fire safety, however these still needed more detail. The manager actioned this immediately. One person said, "If there is a fire then I know I need to go downstairs and leave out of the exit."
- Cleaning products were not being left in communal areas or people's bedrooms. The manager had implemented a series of checks to make sure this did not happen.

### Using medicines safely

- The manager and nominated individual had improved systems to help ensure staff administered people's medicines safely. However, we still found some shortfalls in medicines management. Staff sometimes did not sign to say when 'as and when required' (PRN) medicines had been given. Protocols for PRN medicines were not in place for some people. The manager addressed both of these concerns immediately and put PRN protocols in place and re-addressed the importance of signing for them with the staff team.
- Staff had a good understanding of what medicines were for and had training in safely administering medicines. The manager checked staff competency to administer medicines safely. One person said, "[Staff] bring me my medicines if I need them. No problems."
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented 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.

### Preventing and controlling infection

- The service looked clean and was free from clutter. The manager had implemented checks and audits to

ensure people were being supported to keep their home clean and tidy. People told us they felt the home was clean and staff supported them to take part in cleaning their home if this was their choice.



# 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 our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the well-led key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We had concerns about good governance and management of the service and people not being supported in a person-centered way or to set and achieve goals and aspirations that made sense to them. We will assess the whole key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; Working in partnership with others

- The manager and nominated individual had taken the findings from our last inspection seriously. They had implemented audits and systems to monitor the quality of the service. This included areas such as medicines management, risk assessments and care plans being detailed, fire safety and infection control. These had a positive impact in driving improvements at the service.
- Staff felt well supported by the manager and were confident when supporting people. One person indicated to us staff were 'nice' and 'friendly.'
- The manager and nominated individual consulted external professionals when people needed support with specific health conditions. Where appropriate, external professionals created guidelines for staff to follow and staff had a good understanding of these. One person said, "I saw [health professional]. Staff take me so I feel better."
- There had been a lot of improvements at the service. The manager and nominated individual acknowledged that there were still improvements to be made. For example, risk assessments and care plans still needed more detail and the processes in place to administer medicines also needed to be further improved.
- The nominated individual told us about plans they had to change systems to monitor aspects of the service such as staff training. This would make it easier to assess the effectiveness of staff training and how competent staff felt when supporting people.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service felt homely and staff respected the service as people's home. Staff did not leave their own personal belongings in communal areas and work had begun in improving the environment at the service. One person indicated they were 'happy' with their 'house'.
- There was a positive feeling at the service. Staff were positive about their job roles and people were happy and relaxed in the presence of the staff team. People's comments included, "I love it here. It is my home." and, "[Staff] are lovely here. They are darlings."

- Staff had started to support people to set goals and achieve outcomes which made sense to them. For example, people had started working on accessing the community independently or making their own drink. The nominated individual recognised this was a good start, but more work was needed to fully embed a culture of supporting people to set and achieve meaningful goals. They told us about their plans to achieve this.
- People were happy with how they were supported to follow their preferred pastimes and interests. One person said, "I like going to [place of interest] and go there all the time." Other people showed us what they liked to do and indicated staff supported them to follow these past times.
- The manager and staff team had started considering how best to collect feedback from people and their relatives about the service. The manger told us about their plans to improve this including, using other forms of communication for people who did not always communicate verbally.