Nottingham Community Housing Association Limited

Patrick Court

Inspection report

37 Duke Street
Burton Latimer
Kettering
NN15 5UZ

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13 February 2020

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Ratings

Overall rating for this service	Requires Improvement

Is the service safe?	**Requires Improvement**
Is the service effective?	**Good**
Is the service caring?	**Good**
Is the service responsive?	**Requires Improvement**
Is the service well-led?	**Requires Improvement**

Summary of findings

Overall summary

About the service
Patrick Court is a supported living service providing personal care to seven adults with a learning disability and/or autism.

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 learning disabilities and/or autistic people to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service and what we found
Risk assessments were not always up to date and care plans did not accurately guide staff how to support people safely.

Advice from professionals to improve people's environment was not always implemented in a timely way.

Frequent changes to staffing and management structures meant people did not always receive consistency of care.

People's care plans detailed their strengths and promoted their dignity and independence. Their communication needs were assessed and recorded in detail and staff were observed appropriately interacting with people.

People took part in activities they enjoyed and were supported to access the community. Visitors were welcomed. The home had good relationships with health and social care professionals. People had a healthy, varied diet and ate food they enjoyed.

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.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at www.cqc.org.uk.

Rating at last inspection
The last rating for this service was Outstanding (published 17 August 2017).

Why we inspected
This was a planned inspection based on the previous rating.

Enforcement and recommendations
We have found a breach in relation to safe care at this inspection.

Please see the action we have told the provider to take at the end of the full version of this report.

Follow Up
We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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?

Requires Improvement

The service was not always 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?

Requires Improvement

The service was not always responsive.

Details are in our Responsive findings below.

Is the service well-led?

Requires Improvement

The service was not always well-led.

Details are in our Well-Led findings below.

Patrick Court

Detailed findings

Background to this inspection

Inspection team
The inspection was conducted by one inspector.

Service and service type
This service provides care and support to people living in seven 'supported living' settings. People's care and housing are provided under separate contractual agreements. The Care Quality Commission (CQC) does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. Registered managers and providers have legal responsibilities for how they run the service 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. We sought feedback from the local authority and professionals who work with the service. We did not ask the provider to complete a Provider Information Return prior to this inspection. This is information we require providers to send us annually following their first inspection to give us some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We used all of this information to plan our inspection.

During the inspection
We spoke with one person who used the service and two relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager, quality supervisor and care workers.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection
We continued to seek clarification from the provider to validate evidence found.

Requires Improvement

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 we rated this key question Good. At this inspection we have rated this key question Requires Improvement.

This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing and managing risks; Ensuring equipment and premises are safe. Learning lessons when things go wrong

- Information about risks and safety was not always comprehensive or up to date. For example, one person had risk assessments and care plans in place which had been written by their previous service. These instructed staff to use restraint techniques they were not trained to use. Risk assessments written by staff at Patrick Court were incomplete. This meant staff could not be clear on how to support the person safely and the person was exposed to the risk of injury.
- Reviews and investigations following incidents of distressed behaviour were not always sufficiently thorough and necessary improvements were not always made. For example, the same person had six documented episodes of distressed behaviour in two weeks. Staff had taken action in response to these incidents to keep themselves and the person safe. Reviews had not identified the missing or outdated care plans and risk assessments.

Systems were insufficient to ensure people were protected from the risk of harm. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The registered manager responded immediately during and after the inspection. They confirmed all risk assessments were completed and suitable plans were in place to safely manage distressed behaviour, in line with techniques staff were trained to use.

Safeguarding people from the risk from abuse

- Staff received training in safeguarding vulnerable adults. They demonstrated they understood their responsibilities to protect people from the risks of harm and abuse. One member of staff said, "If I had a safeguarding concern, I would know what action to take depending on the circumstances."
- The provider's safeguarding policy guided staff on how to raise referrals to the local authority safeguarding team. Staff told us they knew where to find information about this on the provider's intranet page if they needed guidance at any time.

Staffing and recruitment

- Arrangements for staffing were disorganised. One relative told us, "[Person] needs consistency with staff and it is different each week." Staff told us they often had to cover absence for colleagues and did not

always know in advance which people they would be supporting. This lack of consistency meant that people did not always receive care from staff who knew them and their needs well.

● Safe recruitment and selection processes were followed. Staff files contained all the necessary preemployment checks which showed only fit and proper applicants were offered roles. All employees' Disclosure and Barring Service (DBS) status had been checked. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.

Using medicines safely

● Staff received training in the safe management of medicines and their competencies had been checked. Medicines were stored correctly and disposed of safely. We saw that staff kept accurate medicines records.

● Regular medicines' audits informed managers of any issues which were rectified in a timely manner.

● Staff assessed people's ability to take their medicine independently and supported them to do so. Where people required support with their medicines, they received these as prescribed.

Preventing and controlling infection

● People were protected from the risks of infection by staff who received training in infection prevention and control.

● Staff followed the provider's infection prevention procedures by using personal protective equipment (PPE) such as gloves and aprons.

Good

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 the best available evidence.

At our last inspection we rated this key question Good. The rating for this key question has remained Good.

This meant people's outcomes were consistently good, and their feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law
- People's needs were assessed before they commenced using the service to ensure staff understood people's needs and choices.
- Assessment documentation showed people's needs under the Equality Act and others such as their cultural needs were considered.
- Staff used evidence-based tools to assess people's risks and needs, for example the support they required with mobility.

Staff support, training, skills and experience
- New staff received a comprehensive induction, including shadowing experienced staff. This provided them with a good foundation of knowledge and understanding of the organisation and their roles.
- Staff told us they enjoyed the training they completed which was sufficient to enable them to carry out their roles.
- Staff received supervision and guidance to support them. Staff told us their managers were very supportive.

Meeting people's needs and preferences in relation to eating and drinking
- People were supported to shop for and prepare food of their choosing.
- Staff had training in food hygiene and helped people plan balanced meals that helped maintain their health and well-being.

Supporting people to live healthier lives and access healthcare services and support. Working together and with other organisations to provide effective and coordinated care
- Staff worked collaboratively across services to understand and meet people's needs. For example, we saw that when people moved to the service, staff from their previous provider were involved over a period of time. This made the transition as smooth as possible.
- People were supported to make healthier life choices such as diet and exercise.
- Staff supported people to attend health appointments and referred people promptly to their GP or other medical services when they showed signs of illness.

Consent to care and treatment
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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA were being met.

- Staff demonstrated they understood the principles of MCA, supporting people to makes choices. People confirmed the staff always asked their consent before providing their care.
- Staff carried out regular mental capacity assessments to establish people's insight and understanding of their care needs. This enabled people to make informed decisions about their care, or health and social care professionals make best interest decisions about people's future care.
- We saw that applications to the Court of Protection had been made appropriately and were being complied with.

Good

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. 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.

Treating people with kindness, respect and compassion
● Staff took pride in people's progress and spoke positively about the people they cared for. One member of staff told us the favourite part of their job was 'supporting the service users - seeing them improve, or if I do something that makes them smile'.
● Staff understood the importance of promoting equality and diversity. Care plans contained information about people's religious beliefs and their personal relationships with their circle of support.
● We saw that staff and people interacted positively and with fondness.

Respecting and promoting people's privacy, dignity and independence
●Staff demonstrated they supported people to maintain their dignity. One relative told us, "Yes, staff are respectful of [person's] privacy and dignity."
● People's independence was promoted. Staff ensured people were encouraged to do as much as they could for themselves. One staff member told us, ""The best thing about working here is seeing the improvement of people, even small things. Seeing them achieve that little goal - to us its small but to them its massive."
● People's information was stored securely within the office, and all staff were aware of keeping people's personal information secure.

Supporting people to express their views and be involved in making decisions about their care
● Staff supported people to make decisions about their care and to express their views in ways which met their needs. We saw one person was supported to use a notebook to plan future activities and communicate with staff.
● The provider had information to refer people to an advocacy service where people needed additional support to make decisions. Advocates are independent of the service and support people to decide what they want and communicate their wishes.
● Lack of consistency in staffing meant people could not build and maintain strong relationships. One staff member told us, "There is no advanced rota – you have no idea who you are working with." One relative told us, "Staff have lots of compassion but [person] thrives on and needs consistency." Another said, "If we get staff who really gel with [person] we would like for them not be moved."

Requires Improvement

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 Outstanding. At this inspection we have rated this key question Requires Improvement.

Planning personalised care

● People's care was not always planned and delivered in a person-centred way. Care plans did not include information about people's earlier lives and experiences. This meant staff could not treat each person as an individual and consider how their past experiences may impact on their current care setting. We discussed this with the registered manager who told us they would look at including this information in care records.

● Although care plans were detailed and staff completed regular reviews, agreed actions and recommendations were not always acted upon. This meant people's current needs were not always met. One relative said, "Things get agreed and everything changes again - staff are confused about what is actually in place."

● Relatives told us they sometimes did not feel listened to and care plans did not always reflect how people preferred to receive their care. For example, one relative told us, "There was a particular issue recently, [information about this] had previously been documented in the care plan but it had been removed, I don't know why."

● People and, where appropriate, their relatives, were mostly involved in creating and updating their care plans. One relative told us, "I go to all [person's] review meetings."

Improving the quality of care in response to complaints or concerns

● Formal complaints were appropriately recorded and dealt with in line with the provider's complaints policy. However, relatives told us issues had not always been listened or responded to in a timely way. This meant they were reluctant to raise things with staff.

● The registered manager was keen to improve the service. They took action to resolve the issues we found during inspection.

Meeting people's communication needs

● Information about the service was available in a range of formats, for example, easy read and large print.

● Care plans detailed information on people's communication needs, including what they found difficult and alternatives forms of communication staff could use.

● Care plans guided staff on recognising how people expressed themselves using non-verbal communication, including when they were in pain or distressed. This enabled staff to respond to people's changing needs.

Supporting people to develop and maintain relationships and to avoid social isolation; Support to follow interests and take part in activities that are socially and culturally relevant

● People were helped to pursue their hobbies and take part in new experiences which enhanced their lives and their well-being. One member of staff told us, "We've put a lot of new things in place for [person], more

meaningful activities. We do 'staging' - a pub environment, a picnic environment - to build [person's] confidence."

● Detailed assessments and care plan enabled people to access the community to take part in special activities and daily living skills such as shopping.

● Staff supported people to maintain relationships with people who were important to them; care plans contained details of people's family relationships visitors were welcomed. We saw a letter of thanks from a family member after one person was supported to dress well for a celebratory lunch out.

End of life care and support

● The service provided care and support for young adults with a diagnosis of Autism and learning and communication difficulties. At the time of inspection, the service was not supporting anyone in end of life care. However, the registered manager told us people and their relatives are given the opportunity to discuss their wishes regarding end of life care.

Requires Improvement

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 we rated this key question Outstanding. At this inspection we have rated this key question Requires Improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managing the quality of the service, meeting legal requirements and staff and managers being clear about their responsibilities

- The registered manager had not identified the issues we found during inspection relating to care plans and risk assessments. People and staff were exposed to the risk of harm as a result.
- Staff attended meetings to discuss changes to the service and refresh knowledge. Staff told us they found these meetings useful.
- The registered manger was keen to ensure staff felt valued. Staff felt well-supported. One staff member told us, "[Registered manager] gives good advice, he's quite observant, he asks how I am, his door is always open."

Leadership vision, values and culture; Acting with honesty and transparency if something goes wrong. Continuous learning, innovation and improving the quality of care

- Frequent changes to staffing and the management structure meant that people did not always receive consistent and reliable care. Relatives told us, "[The provider] has too many changes, there's a huge turnover of staff, and at the top of the chain, they make changes too. [It is] without consultation, [person] was seeing lots of different people and I didn't know who to speak to" and, "The support workers are doing a good job but the whole system needs a shakeup."
- The registered manager was receptive to feedback throughout the inspection and responded quickly to address concerns and improve the service.
- The management team supported staff to learn from incidents and actions taken. We saw records of debriefs which had been held after some incidents to encourage staff to reflect on what had happened.
- The registered manager was aware of their responsibility to keep people informed of actions taken following incidents in line with duty of candour.

Working in partnership with others

- Staff did not always take action in line with recommendations made by specialist professionals. For example, suggestions made to improve one person's home environment to suit their needs had not been responded to in a timely manner.
- Staff worked in partnership with key organisations to support care provision. There was a close working relationship with learning disability nurses and social workers.

Engaging and involving people using the service, the public and staff

- Staff sought feedback from people according to their needs. For example, people's responses to activities were evaluated and additional or different activities identified as a result.
- People's equality characteristics were considered when sharing information, accessing care and activities.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take.We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment The registered manager had failed to ensure care plans and risk assessments were in place for staff to support people safely.