

# Parkcare Homes (No.2) Limited

# The Old Vicarage

## Inspection report

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04 December 2022

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

The Old Vicarage is registered to provide accommodation and personal care for up to 7 people with a learning disability and people with autism. At the time of the inspection, there were 7 people living in the home.

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

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 autistic people.

### Right Support:

People at the Old Vicarage were placed at the heart of the service. There was a strong person-centred culture that encouraged people to make decisions about their life. Safe recruitment practices were followed, and people were supported by staff who knew them well. People's religious, cultural and personal diversity were recognised by the service, with their care plans outlining their backgrounds and beliefs.

The outcomes for people using the service reflected the principles and values of 'Right support, right care, right culture' in the promotion of choice, control, independence and inclusion. People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. Activities were individualised to suit people's personal preferences and staff actively encouraged and supported people to achieve their goals and aspirations.

### Right Care:

People consistently told us they felt safe and well cared for and relatives corroborated this. Staff were kind, caring and compassionate. People and their relatives were included in decisions about their care and support. People's individual preferences were acknowledged, and people were encouraged and supported to personalise their rooms. The environment care was clean and well-maintained.

### Right Culture:

People's quality of life was enhanced by the service's culture of improvement and inclusivity. The registered manager and staff had established a strong and visible person-centred culture in the service through their 'Positive Culture Pledge' and all staff we spoke with were fully supportive of this.

People and staff were consistently complimentary of the registered manager and the way the service was run. Staff told us the management team were very knowledgeable, inspired a caring approach and led by example. Feedback from people, staff, professionals and relatives was sought in order to continuously drive

improvements and develop the ongoing delivery of care and support people received.

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 good (published 15 October 2018).

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# The Old Vicarage

## 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was completed by 2 inspectors.

#### Service and service type

The Old Vicarage 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. The Old Vicarage 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

#### Notice of inspection

This inspection was unannounced.

Inspection activity started on 23 November 2022 and ended on 04 December 2022. We visited the location's service on 23 November 2022 and 04 December 2022.

#### 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 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 used all this information to plan our inspection.

We contacted social care commissioners who help arrange and monitor the care of people living at The Old Vicarage. We also contacted Healthwatch Kirklees. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

#### During the inspection

We spoke to 5 people who lived at the service about their experience of the care provided. We spoke with 6 members of staff which included, the registered manager, the deputy manager and 4 care workers.

We reviewed a range of records. This included 2 people's care records and medication records. We looked at 2 staff files in relation to recruitment, staff supervision and training. A variety of records relating to the management of the service, including governance records, policies and procedures were reviewed.

#### After the inspection

We received feedback about the service from 3 relatives and 3 healthcare professionals. We sought clarification from the registered manager 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 we rated this key question as good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems in place to safeguard people from the risk of abuse.
- People had developed positive and trusting relationships with staff. Comments from people included, "If I was concerned about something, I would tell staff."
- Staff had a clear understanding of safeguarding people and how to report any concerns. Safeguarding training records were up to date. A staff member told us, "If I had a safeguarding concern, I would discuss it with the senior. [The registered manager] would act, but if I was not happy, I would go above that and contact the manager's manager. If I still saw no improvement, I would go to the local authority safeguarding team or police depending on the situation."

Assessing risk, safety monitoring and management

- Risks associated with people's care and support were identified and appropriately managed to keep people safe. Risk assessments included health conditions and positive behaviour strategies.
- People were supported to take positive risks towards independence. A health professional commented, "The Old Vicarage is a highly skilled service who are capable of managing complexity and risk."
- Gas and fire safety were managed effectively. Staff and people took part in fire drills and knew how to safely evacuate the building.

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 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- Safe recruitment processes such as Disclosure and Barring Service (DBS) checks were used in line with the provider's recruitment policy to ensure staff employed were suitable to work with vulnerable people. DBS checks provide information including details about convictions and cautions held on the Police National

Computer. The information helps employers make safer recruitment decisions.

- There were enough staff deployed to keep people safe and meet their needs in a timely manner. Each person had their own key worker who provided one to one support. This enabled people to take part in activities and visits how and when they wanted.

#### Using medicines safely

- People's medication was managed safely. The service ensured people's behaviour was not controlled by excessive use of medicines. Staff understood and implemented best practice guidance in this area.
- Staff followed safe systems and processes to administer, record and store medicines. Medical profiles contained relevant information about people's allergies, their preferred way of taking medication and how to communicate with them.
- Staff knew the correct procedure to follow in the event of a medicines error. One staff member said, "I would report it to a senior, and they would record it. The registered manager will redo a staff competency [assessment] if there was an error."

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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 admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Visiting in care homes

- The provider had systems in place to support people to have visits from family and friends in line with guidance.

#### Learning lessons when things go wrong

- Staff knew when and how to report accidents or incidents.
- A record of accidents and incidents was maintained. Staff recognised incidents and reported them appropriately and management team investigated incidents and shared lessons learned.



# 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 good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People's quality of life was enhanced by the service's culture of inclusivity and person-centred care. People's care plans reflected their current needs as well as longer-term aspirations. A person told us, "They [staff] are really good to me, they treat me well and I am very happy here."
- The management team and staff supported people to develop their skills, confidence and to live more independently. For instance, people's levels of anxiety had decreased after moving into the service and as a result, they were able to enjoy activities they had never experienced before.
- People were supported to develop and maintain relationships. There was an easy read policy available for people around consent, sex and relationships.
- Team meetings enabled staff to discuss specific topics relevant to their roles and the needs of people living at the service. Supervision included formally organised one to one sessions and appraisals.

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

- Staff at all levels were clear about their roles and responsibilities and who they should go to for support and guidance if required.
- The registered manager understood their legal responsibility and acted on the duty of candour where appropriate.
- The management team had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the service.

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

- People were supported to maintain relationships with their relatives through days out, visits, email, phone or video calls.
- The registered manager promoted constructive engagement with staff, people and relatives. One staff said, "We are consistently encouraged to deliver person-centred care which achieves good results."
- The provider held monthly key worker meetings, annual family and staff surveys. Action plans were put in place to address any concerns that arose from feedback given.
- The provider listened to and acted on concerns from relatives which encouraged open communication. A relative commented, "The care home have always responded positively to our concerns and we believe we have established a good, trusting and open relationship. This we value."

#### Working in partnership with others

- The service worked well in partnership with other health and social care professionals, such as social workers and community nurses which helped to give people using the service a voice and empowered them to live the lives they chose.
- There was multi-disciplinary support for people that showed joint working between partners involved in people's care. A healthcare professional commented, "They are absolutely committed to improving the quality of life of all service users in their care and demonstrate excellent outcomes and person-centred care in all they do."